Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF WISCONSIN	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this is an amended filing

## Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

02/20

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.		government-issued ure identification (for nple, your driver's use or passport).  g your picture tification to your	First name  F.  Middle name  Valencia  Last name and Suffix (Sr., Jr., II, III)	Yolanda First name  C. Middle name  Valencia  Last name and Suffix (Sr., Jr., II, III)
2.	use Inclu	other names you have d in the last 8 years ade your married or den names.		
3.	you num Indi	y the last 4 digits of r Social Security aber or federal vidual Taxpayer tification number	xxx-xx-3161	xxx-xx-2635

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	■ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EIN	EIN			
5.	Where you live	2540 Gaslight Court Oshkosh, WI 54904	If Debtor 2 lives at a different address:			
Oshk Numbe		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Winnebago				
		County	County			
If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.		above, fill it in here. Note that the court will send any	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for bankruptcy	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)			

Debtor 1	David F. Valencia
Debtor 2	Yolanda C. Valencia

Case number (if known)	

7.	The chapter of the Bankruptcy Code you are choosing to file under				n, see <i>Notice Required by</i> I and check the appropriate	11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy e box.			
	<b>3</b>	Chap	ter 7						
		☐ Chap	ter 11						
		☐ Chap	ter 12						
		☐ Chap	ter 13						
8.	How you will pay the fee	abo ord	about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.						
		☐ Inc	ed to pa	y the fee in installmer		on, sign and attach the Application for Individuals to Pay			
			•	in Installments (Official Form 103A).  my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may,					
		but app	is not red olies to yo	uired to, waive your fe ur family size and you	e, and may do so only if yo are unable to pay the fee ir	n only if you are filling for Chapter 7. By law, a judge may, ur income is less than 150% of the official poverty line that a installments). If you choose this option, you must fill out cial Form 103B) and file it with your petition.			
9.	Have you filed for bankruptcy within the last 8 years?	■ No.							
			District		When	Case number			
			District		When	Case number			
			District		When	Case number			
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	■ No □ Yes.							
			Debtor			Relationship to you			
			District		When	Case number, if known			
			Debtor			Relationship to you			
			District		When	Case number, if known			
11.	Do you rent your residence?	■ No.	Go to	ine 12.					
	residence?	☐ Yes.	Has yo	our landlord obtained a	n eviction judgment agains	t you?			
				No. Go to line 12.					
				Yes. Fill out <i>Initial Sta</i> this bankruptcy petition		Judgment Against You (Form 101A) and file it as part of			

	otor 1 David F. Valencia Yolanda C. Valenci	cia		Case number (if known)	
Par	t 3: Report About Any Bu	ısinesses	You Own as a Sole Proprie	tor	
12. Are you a sole proprietor of any full- or part-time business?		□ No.	□ No. Go to Part 4.		
		■ Yes.	Name and location of bus	siness	
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation,		Valencia Financial Se Name of business, if any	ervices, LLC	
	partnership, or LLC.  If you have more than one		2540 Gaslight Ct Oshkosh, WI 54904		
	sole proprietorship, use a separate sheet and attach		Number, Street, City, Sta	te & ZIP Code	
	it to this petition.		Check the appropriate bo	ox to describe your business:	
			☐ Health Care Busing	ness (as defined in 11 U.S.C. § 101(27A))	
			☐ Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))	
			☐ Stockbroker (as d	efined in 11 U.S.C. § 101(53A))	
				er (as defined in 11 U.S.C. § 101(6))	
			■ None of the above	9	
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation	s. If you indicate that you are	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of iederal income tax return or if any of these documents do not exist, follow the procedure	
	For a definition of small	■ No.	I am not filing under Chap	oter 11.	
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter Code.	11, but I am NOT a small business debtor according to the definition in the Bankruptcy	
		☐ Yes.		11, I am a small business debtor according to the definition in the Bankruptcy Code, and d under Subchapter V of Chapter 11.	
		☐ Yes.	I am filing under Chapter proceed under Subchapte	11, I am a debtor according to the definition in the Bankruptcy Code, and I choose to er V of Chapter 11.	
Par	t 4: Report if You Own or	Have Any	/ Hazardous Property or An	y Property That Needs Immediate Attention	
14.	Do you own or have any property that poses or is	■ No.			
	alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is the hazard?		
p C p	public health or safety? Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?		
For example, do you o perishable goods, or livestock that must be i or a building that needs urgent repairs?			Where is the property?		
	-			Number, Street, City, State & Zip Code	

Debtor 1 David F. Valencia
Debtor 2 Yolanda C. Valencia

Case number (if known)

#### Part 5:

#### **Explain Your Efforts to Receive a Briefing About Credit Counseling**

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 □ I am not required to receive a briefing about credit counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1	David F. Valencia
Debtor 2	Yolanda C. Valencia

Case number	(if known)

Par	t 6: Answer These Quest	ions for Rep	orting Purposes			
16.	What kind of debts do you have?		re your debts primarily consudividual primarily for a persona			e defined in 11 U.S.C. § 101(8) as "incurred by an
			No. Go to line 16b.			
			Yes. Go to line 17.			
			re your debts primarily busing noney for a business or investm			ebts that you incurred to obtain business or investment.
			No. Go to line 16c.			
			Yes. Go to line 17.			
		16c. S	tate the type of debts you owe	that are not consun	ner debts or bus	siness debts
17.	Are you filing under Chapter 7?	□ No. I	am not filing under Chapter 7. C	Go to line 18.		
	Do you estimate that after any exempt property is excluded and		am filing under Chapter 7. Do y re paid that funds will be availal			property is excluded and administrative expense itors?
	administrative expenses		No			
	are paid that funds will be available for distribution to unsecured creditors?		] Yes			
18.	How many Creditors do	<b>■</b> 1-49		<b>1</b> ,000-5,000		□ 25,001-50,000
	you estimate that you owe?	☐ 50-99		<b>5001-10,000</b>	)	□ 50,001-100,000
	owe.	□ 100-199 □ 200-999		□ 10,001-25,00	00	☐ More than100,000
19.	How much do you ☐ \$0 - estimate your assets to ☐ \$50			□ \$1,000,001 -		□ \$500,000,001 - \$1 billion
	be worth?	\$50,001	- \$100,000 1 - \$500,000	□ \$10,000,001 □ \$50,000,001		☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion
			1 - \$500,000 1 - \$1 million	□ \$100,000,001 □ \$100,000,00		
20.	How much do you estimate your liabilities	□ \$0 - \$50		□ \$1,000,001 -		\$500,000,001 - \$1 billion
	to be?	□ \$50,001 - \$100,000 □ \$100,001 - \$500,000		☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million		□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion
			1 - \$1 million	\$100,000,00		_ + -// +
Par	t 7: Sign Below					
For	you	I have exan	nined this petition, and I declare	under penalty of p	erjury that the i	nformation provided is true and correct.
						gible, under Chapter 7, 11,12, or 13 of title 11, d I choose to proceed under Chapter 7.
			ey represents me and I did not p have obtained and read the no			is not an attorney to help me fill out this o).
		I request re	lief in accordance with the chap	oter of title 11, Unite	ed States Code,	specified in this petition.
						ney or property by fraud in connection with a 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519
			F. Valencia		/s/ Yolanda	
		David F. \ Signature o			Yolanda C. V Signature of D	
		Executed o	April 21, 2022 MM / DD / YYYY		Executed on	April 21, 2022 MM / DD / YYYY

Debtor 1	David F. Valencia
Debtor 2	Yolanda C. Valencia

Case number	(if known)	
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For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Paul G. Swanson	Date	April 21, 2022
Signature of Attorney for Debtor		MM / DD / YYYY
Paul G. Swanson 1007861		
Printed name		
STEINHILBER SWANSON LLP		
Firm name		
107 Church Avenue		
Oshkosh, WI 54901		
Number, Street, City, State & ZIP Code		
Contact phone <b>920-235-6690</b>	Email address	pswanson@steinhilberswanson.com
1007861 WI		
Bar number & State		

Certificate Number: 00134-WIE-CC-036348412



# **CERTIFICATE OF COUNSELING**

I CERTIFY that on February 22, 2022, at 7:25 o'clock PM CST, David Flores Valencia received from Cricket Debt Counseling, an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the Eastern District of Wisconsin, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: February 22, 2022

By: /s/Sharon Odhiambo

Name: Sharon Odhiambo

Title: Counselor

\* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. §§ 109(h) and 521(b).

Certificate Number: 00134-WIE-CC-036348016



# **CERTIFICATE OF COUNSELING**

I CERTIFY that on <u>February 22</u>, 2022, at 5:18 o'clock <u>PM CST</u>, <u>Yolanda Caballero Valencia</u> received from <u>Cricket Debt Counseling</u>, an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the <u>Eastern District of Wisconsin</u>, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: February 22, 2022

By: /s/Radhi Ouma

Name: Radhi Ouma

Title: Counselor

\* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. §§ 109(h) and 521(b).

Fill	in this inforn	nation to identify your	case:			
Deb	otor 1	David F. Valencia First Name	Middle Name	Last Name		
Deb	otor 2	Yolanda C. Valend		Last Name		
1	use if, filing)	First Name	Middle Name	Last Name		
Uni	ted States Ba	nkruptcy Court for the:	EASTERN DISTRICT O	OF WISCONSIN		
Cas	se number					
	lown)				☐ Check	cif this is an
					amen	ded filing
<u>Of</u>	ficial Fo	<u>rm 106Sum</u>				
Su	mmary o	f Your Assets a	and Liabilities a	nd Certain Statistical Informatio	<u>n</u>	12/15
				e are filing together, both are equally responsib he information on this form. If you are filing am		
		•		k the box at the top of this page.	silueu Scileuu	ies aiter you life
Par	t 1: Summ	arize Your Assets				
					V	
					Your a	ssets of what you own
1.	Schedule A	/B: Property (Official Fo	orm 1064/B)			
١.					\$	338,120.00
	1b. Copy line	e 62, Total personal prop	perty, from Schedule A/B.		\$	14,760.00
	1c. Copy line	e 63, Total of all property	y on Schedule A/B		\$	352,880.00
Par	t 2: Summ	arize Your Liabilities				
					Your li	abilities
						t you owe
2.			aims Secured by Property			050 050 04
	2a. Copy the	e total you listed in Colur	nn A, <i>Amount of claim,</i> at	the bottom of the last page of Part 1 of Schedule I	D \$	256,658.04
3.			Unsecured Claims (Officia		\$	56,096.88
			"	ns) from line 6e of Schedule E/F	·····	00,000.00
	3b. Copy th	e total claims from Part :	2 (nonpriority unsecured of	claims) from line 6j of Schedule E/F	\$	220,343.99
				Your total liabilit	ies \$	533,098.91
						<u> </u>
Par	t 3: Summ	arize Your Income and	Expenses			
4.	Schedule I:	Your Income (Official Fo	rm 106I)			
4.				e I	\$	5,700.00
5.		Your Expenses (Official nonthly expenses from line			\$	5,232.45
Par	t 4: Answe	r These Questions for	Administrative and Stat	tistical Records		
6.	-		er Chapters 7, 11, or 13? on this part of the form. C	P Check this box and submit this form to the court with	n your other scl	nedules.
			-			

Yes

7. What kind of debt do you have?

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

Debtor 1	David F. Valencia
Debtor 2	Yolanda C. Valencia

Casa	number	(if known)	
Case	HUHHDEL	(II KIIOWII)	

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11; <b>OR</b> , Form 122B Line 11; <b>OR</b> , Form 122C-1 Line 14.

\$				

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim
From Part 4 on Schedule E/F, copy the following:	
9a. Domestic support obligations (Copy line 6a.)	\$
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$
9d. Student loans. (Copy line 6f.)	\$
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$
9g. <b>Total.</b> Add lines 9a through 9f.	\$

	David F. Va	alencia					
	First Name		ddle Name	Last Name			
Debtor 2 Spouse, if filing	Yolanda C.		ddle Name	Last Name			
	es Bankruptcy Court fo			CT OF WISCONSIN			
Jilica Glat	es bankruptey court it	or the. <u>Enoter</u>		or or wideorion			
Case numb	per						Check if this is a amended filing
>(C) - 1 - 1	E 400A/	<b>D</b>					
	Form 106A/						
cnec	dule A/B: P	roperty					12/15
.1 <b>2540</b>	here is the property?  Gaslight Court		What 	t is the property? Check all that apply Single-family home	Do not ded	uct secured clai	ims or exemptions. Put
.1 <b>2540</b>		escription	What ■		the amount	of any secured	ims or exemptions. Put I claims on <i>Schedule D:</i> Is Secured by Property.
.1 2540 Street ac	Gaslight Court ddress, if available, or other d	54904-0000	_	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	Current va	of any secured Who Have Claim Une of the perty?	I claims on Schedule D: as Secured by Property.  Current value of the portion you own?
.1 <b>2540</b> Street ac	Gaslight Court ddress, if available, or other d		_	Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other  has an interest in the property? Check one	Current va entire prop \$33  Describe ti (such as fe a life estate	t of any secured who Have Claim lue of the perty?  38,120.00 he nature of your simple, tena e), if known.	Current value of the portion you own? \$338,120.00
.1  2540 Street ac  Oshk City	Gaslight Court ddress, if available, or other d	54904-0000		Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other  has an interest in the property? Check one Debtor 1 only	Current va entire prop \$33  Describe ti (such as fe	t of any secured who Have Claim lue of the perty?  38,120.00 he nature of your simple, tena e), if known.	Current value of the portion you own? \$338,120.00
.1  2540 Street ac  Oshk City	Gaslight Court ddress, if available, or other d	54904-0000	Who	Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other  has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Current va entire prop \$33  Describe ti (such as fe a life estati Fee sim	t of any secured who Have Claims lue of the perty? 38,120.00 he nature of your sessimple, tenate), if known. ple	Current value of the portion you own? \$338,120.00
2540 Street ac  Oshk City  Winn	Gaslight Court ddress, if available, or other d	54904-0000		Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another r information you wish to add about this it	Current va entire prop \$33  Describe tl (such as fe a life estate Fee simp	tof any secured who Have Claims lue of the perty? 38,120.00 he nature of your sessimple, tenate), if known. ple	Current value of the portion you own? \$338,120.00  Sur ownership interest ancy by the entireties, o
.1 2540 Street ac	Gaslight Court ddress, if available, or other d	54904-0000	Who	Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other  has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Current va entire prop \$33  Describe ti (such as fa a life estate Fee Simp  Check (see insem, such as lo	tof any secured who Have Claims lue of the perty? 38,120.00 he nature of your earlier tena e), if known. ple	Current value of the portion you own? \$338,120.00  Sur ownership interest ancy by the entireties, o
2540 Street ac  Oshk City  Winn	Gaslight Court ddress, if available, or other d	54904-0000	Who	Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another r information you wish to add about this iterty identification number:	Current va entire prop \$33  Describe ti (such as fa a life estate Fee Simp  Check (see insem, such as lo	tof any secured who Have Claims lue of the perty? 38,120.00 he nature of your earlier tena e), if known. ple	Current value of the portion you own? \$338,120.00  Sur ownership interest ancy by the entireties, ownership interest ancy by the entireties.

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Deni		Yolanda C. Val	cia encia	Ca	ase number (if known)	
3. <b>C</b> a	ırs, vans	s, trucks, tractors	s, sport utility ve	hicles, motorcycles		
	No					
	Yes					
0.4		Ford			Do not deduct secured c	laims or exemptions. Put
3.1	Make:			Who has an interest in the property? Check one	the amount of any secure	ed claims on Schedule D:
	Model: Year:	1998		Debtor 1 only	Creditors Who Have Cla	ims Secured by Property.
				Debtor 2 only	Current value of the	Current value of the
		imate mileage: nformation:		■ Debtor 1 and Debtor 2 only  ☐ At least one of the debtors and another	entire property?	portion you own?
		condition		At least one of the debtors and another		
	9			■ Check if this is community property (see instructions)	\$1,000.00	\$1,000.00
	Nation	BMW		When have an interest in the assessment 2 of	Do not deduct secured c	laims or exemptions. Put
3.2	Make:	F00		Who has an interest in the property? Check one		ed claims on Schedule D: ims Secured by Property.
	Model: Year:	2013		Debtor 1 only		, , ,
		imate mileage:	100000+	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
		nformation:	1000001	☐ At least one of the debtors and another	ciiii o proporty i	pormon you on
	good	condition.			*	
				☐ Check if this is community property (see instructions)	\$3,000.00	\$3,000.00
D. (				n for all of your entries from Part 2, including ar		\$4,000.00
	3 Desc	u have attached	for Part 2. Write	hat number here		\$4,000.00
,	ou own	u have attached	for Part 2. Write	ems		·
		u have attached ribe Your Personal or have any lega	for Part 2. Write of and Household Ite alor equitable in	hat number here		\$4,000.00  Current value of the portion you own?  Do not deduct secured claims or exemptions.
<i>E.</i>	ousehole xamples No	u have attached ribe Your Personal or have any lega d goods and furn : Major appliances	for Part 2. Write of and Household Ite al or equitable in his hings	ems		Current value of the portion you own? Do not deduct secured
<i>E.</i>	ousehole xamples No	u have attached ribe Your Personal or have any lega	for Part 2. Write of and Household Ite al or equitable in his hings	ems erest in any of the following items?		Current value of the portion you own? Do not deduct secured
<i>E.</i>	ousehole xamples No	u have attached ribe Your Personal or have any lega d goods and furr : Major appliances	for Part 2. Write of and Household Ite al or equitable in hishings s, furniture, linens dousehold good itchen and din touch/chairs/ta	chat number hereems erest in any of the following items?  china, kitchenware  ds and furnishings - beds with mattresses ing table and chairs, living room bles, rugs, pots & pans, dishes, grill, mirro	(\$1350);	Current value of the portion you own? Do not deduct secured claims or exemptions.
<i>E.</i>	ousehole xamples No	u have attached ribe Your Personal or have any lega d goods and furr : Major appliances	for Part 2. Write of and Household Ite al or equitable in hishings s, furniture, linens dousehold good itchen and din touch/chairs/ta	chat number hereems erest in any of the following items?  china, kitchenware  ds and furnishings - beds with mattresses ing table and chairs, living room	(\$1350);	Current value of the portion you own? Do not deduct secured
7. <b>El</b>	ectronic	u have attached  ribe Your Personal or have any lega d goods and furr : Major appliance:  describe	for Part 2. Write of and Household Ite al or equitable in hishings s, furniture, linens dousehold good itchen and din couch/chairs/tarv/stand (\$3010)	chat number hereems erest in any of the following items?  china, kitchenware  ds and furnishings - beds with mattresses ing table and chairs, living room bles, rugs, pots & pans, dishes, grill, mirro	(\$1350); es, and	Current value of the portion you own? Do not deduct secured claims or exemptions.
7. <b>El</b>	ectronic xamples	u have attached  ribe Your Personal or have any lega d goods and furr : Major appliance:  describe	for Part 2. Write of and Household Ite al or equitable in hishings s, furniture, linens dousehold good itchen and din couch/chairs/tarv/stand (\$3010)	chat number here	(\$1350); es, and	Current value of the portion you own? Do not deduct secured claims or exemptions.
7. <b>El</b>	ectronic xamples	u have attached  ribe Your Personal or have any lega d goods and furr : Major appliance:  Pescribe	for Part 2. Write of and Household Ite al or equitable in hishings s, furniture, linens Household good itchen and din couch/chairs/tarv stand (\$3010 radios; audio, videones, cameras, mand the stand of	chat number here	(\$1350); ps, and rs, scanners; music collecti	Current value of the portion you own? Do not deduct secured claims or exemptions.

Debtor 2		nown)
Exan	ctibles of value  nples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, other collections, memorabilia, collectibles	coin, or baseball card collections;
■ No	es. Describe	
Exan	oment for sports and hobbies  inples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; can  musical instruments	noes and kayaks; carpentry tools;
■ No	es. Describe	
10. <b>Fire</b> a Exa □ No	amples: Pistols, rifles, shotguns, ammunition, and related equipment	
■ Ye	es. Describe	
	38 special	\$750.00
□ No	amples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories	
	Clothing	\$450.00
□ No ■ Ye	es. Describe  wedding rings/jewelry (purchased at Costco)	\$2,000.00
Exa ■ No	-farm animals amples: Dogs, cats, birds, horses o es. Describe	
■ No	other personal and household items you did not already list, including any health aids you did not los. Give specific information	ist
15. <b>Ad</b>	ld the dollar value of all of your entries from Part 3, including any entries for pages you have attache Part 3. Write that number here	d \$9,640.00
Part 4:	Describe Your Financial Assets	
	own or have any legal or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No	amples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your	petition

	btor 1 btor 2	David F. V Yolanda C	/alencia :. Valencia	l	Ca	se number <i>(if known)</i>	
	Exampl				ounts; certificates of deposit; shares in credi s with the same institution, list each.	t unions, brokerage houses, and	other similar
	□ No ■ Yes				Institution name:		
			17.1.	Checking	Community First Credit Union		\$848.00
			17.2.	Savings	Community First Credit Union		\$24.00
			17.3.	Checking	Wells Fargo Bank		\$248.00
	Example ■ No			ely traded stocks ent accounts with br	okerage firms, money market accounts name:		
	Non-pul joint ve □ No		stock and	interests in incorp	orated and unincorporated businesses, i	ncluding an interest in an LLC	, partnership, and
	Yes.	Give specific		about themne of entity:		of ownership:	
			ope Wis ent cor	erations did incloses on sin. No tanglity through which	sing fees were paid. Have not	100 %	\$0.00
	Negotia	able instrume	<i>nt</i> s include p	ersonal checks, cas	otiable and non-negotiable instruments shiers' checks, promissory notes, and mone ansfer to someone by signing or delivering the		
		Give specific		about them uer name:			
		nent or pensi les: Interests			403(b), thrift savings accounts, or other pens	sion or profit-sharing plans	
	☐ Yes. L	ist each acc		ely. of account:	Institution name:		
	Your sh Example		used deposit	s you have made so	o that you may continue service or use from public utilities (electric, gas, water), telecom		rs
	■ No □ Yes				Institution name or individual:		
23.	Annuitio	es (A contrac	et for a period	dic payment of mone	ey to you, either for life or for a number of ye	ears)	
	□ Yes		Issuer nam	e and description.			
				n an account in a q and 529(b)(1).	ualified ABLE program, or under a qualif	ied state tuition program.	
	■ No □ Yes		Institution r	name and descriptio	n. Separately file the records of any interest	s.11 U.S.C. § 521(c):	
Offi	cial Form	106A/B			Schedule A/B: Property		page 4

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Best Case Bankruptcy

	ebtor 1 ebtor 2	David F. Valenc Yolanda C. Vale		Case number (if known)	
25.	Trusts, ■ No	, equitable or future	interests in property (other than anything lis	sted in line 1), and rights or powers exe	cisable for your benefit
	☐ Yes.	Give specific information	ation about them		
	Examµ ■ No		marks, trade secrets, and other intellectual p names, websites, proceeds from royalties and l ation about them		
27.			other general intangibles , exclusive licenses, cooperative association ho	oldings, liquor licenses, professional license	es
	_	Give specific information	ation about them		
M	oney or	property owed to yo	ou?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax ref ■ No	funds owed to you			
	☐ Yes.	Give specific informa	tion about them, including whether you already	filed the returns and the tax years	
	Examp ■ No	r support ples: Past due or lump Give specific informa	o sum alimony, spousal support, child support, ition	maintenance, divorce settlement, property	settlement
	Exam <sub>p</sub> ■ No		disability insurance payments, disability benefits loans you made to someone else	s, sick pay, vacation pay, workers' compen	sation, Social Security
31.	_Examp	sts in insurance poli ples: Health, disability	cies r, or life insurance; health savings account (HSA	A); credit, homeowner's, or renter's insuran	се
	□ No ■ Yes.	Name the insurance	company of each policy and list its value. Company name:	Beneficiary:	Surrender or refund value:
			(W) Allianz Life Insurance - whole life, \$325,000 face amount, but little cash value; borrowed \$30,000-\$40,000 over years ago for necessary living		Unknown
			expenses		Olikilowii
	If you a		at is due you from someone who has died a living trust, expect proceeds from a life insura	ance policy, or are currently entitled to rece	ive property because
	■ No □ Yes.	Give specific informa	ation		
	Claims	s against third partie	es, whether or not you have filed a lawsuit or		
	■ No	•	oyment disputes, insurance claims, or rights to	ou <del>c</del>	
	⊔ Yes.	Describe each claim	l		

Debto		David Yoland		encia 'alencia								Case number (if known)		
		ontingen	nt and u	ınliquidat	ed claims	of every	nature, inc	luding	counte	rclaims	of	the debtor and rights to	set of	f claims
_	No Yes. [	Describe	each c	aim										
_	<b>ny fina</b> No	ncial as	sets yo	ou did not	already l	ist								
	Yes. C	Give spe	cific info	ormation										
							rt 4, includi					s you have attached		\$1,120.00
Part 5	Desc	ribe Any	Busine	ss-Related	Property Y	ou Own o	r Have an Inte	erest In	n. List any	/ real esta	ate	in Part 1.		
	-		e any le	gal or equi	table inter	est in any l	business-rela	ated pro	operty?					
_		o Part 6.												
ЦΊ	es. Go	to line 38	3.											
Part 6				and Comme			l Property Yo	ou Own	or Have	an Intere	est l	ln.		
46. <b>D</b> e	o you d	own or h	nave an	y legal or	equitable	e interest	in any farm	n- or co	ommerc	ial fishir	ng-	-related property?		
	No. G	o to Part	7.											
	Yes.	Go to line	47.											
Part 7		Dogoribo	All Dro	norty Vou	Durn or Ho	vo an Intor	act in That V	ou Did	Not List	Abovo				
rail i	•	Describe	All FIO	perty rou t	JWII OI HA	ve an inter	est in That Yo	ou Diu	NOI LIST	ADOVE				
_E				ets, country			t already lis	st?						
_		ive spec	cific info	rmation										
54	۸dd th	e dollar	value	of all of vo	ur entrie	s from Da	rt 7 Write t	that nu	ımbar be	are.				\$0.00
J4. I	-luu tii	c dollar	value	or an or yo	ur critic.	3 110111 T a	iit 7. Wille t	inat na	iiiibei ii		••••			φο.σο_
Part 8	: L	ist the To	otals of	Each Part o	of this Form	m								
55. I	Part 1:	Total re	al esta	te, line 2										\$338,120.00
		Total ve							\$4,0	00.00				
		-		and hous		ems, line 1	15			40.00				
				assets, li		U 45			\$1,1	20.00				
				s-related p			ma E2			\$0.00				
				d fishing- operty not		-	ne 52	+		\$0.00 \$0.00				
				r <b>ty.</b> Add lin					\$14,7	60.00		Copy personal property t	total	\$14,760.00
63.	Γotal o	f all pro	perty o	n Schedu	le A/B. A	dd line 55	+ line 62						_	\$352,880.00

	mation to identify your	ouse.		
Debtor 1	David F. Valencia	l		
	First Name	Middle Name	Last Name	
Debtor 2	Yolanda C. Valen	cia		
Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba Case number	ankruptcy Court for the:	EASTERN DISTRICT O	F WISCONSIN	
if known)				☐ Check if this is an amended filing

### Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2. Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pa	rt 1: Identify the Property You Claim as E	xempt			
1.	Which set of exemptions are you claiming	? Check one only, ever	n if yo	our spouse is filing with you.	
	■ You are claiming state and federal nonban	kruptcy exemptions. 1	11 U.S	S.C. § 522(b)(3)	
	☐ You are claiming federal exemptions. 11 t	J.S.C. § 522(b)(2)			
2.	For any property you list on Schedule A/B	that you claim as exe	mpt,	fill in the information below.	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	2540 Gaslight Court Oshkosh, WI	\$338,120.00		\$81,461.96	Wis. Stat. § 815.20
	54904 Winnebago County Value listed is EFMV per 2021 tax bill which debtors believe to be accurate Line from <i>Schedule A/B</i> : 1.1			100% of fair market value, up to any applicable statutory limit	
	1998 Ford Explorer	\$1,000.00		\$1,000.00	Wis. Stat. § 815.18(3)(g)
	Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
	2013 BMW 529 100000+ miles good condition.	\$3,000.00		\$3,000.00	Wis. Stat. § 815.18(3)(g)
	Line from Schedule A/B: 3.2			100% of fair market value, up to any applicable statutory limit	
	Household goods and furnishings - beds with mattresses (\$1350);	\$4,960.00		\$4,960.00	Wis. Stat. § 815.18(3)(d)
	kitchen and dining table and chairs,			100% of fair market value, up to	

Official Form 106C

Schedule C: The Property You Claim as Exempt

Page 18 of 58

rugs, pots & pans, dishes, grill, mirros, and TV stand (\$3010); gas

washer & dryer (\$600), Line from Schedule A/B: 6.1

David F. Valencia Debtor 1 Yolanda C. Valencia Debtor 2 Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B 3 Plasma TVs (\$450); 9 year old Wis. Stat. § 815.18(3)(d) \$1,480.00 \$1,480.00 desktop PC (\$250); Laptop (\$600); HP Color laser printer (\$150) and paper 100% of fair market value, up to shredder (\$30) any applicable statutory limit Line from Schedule A/B: 7.1 38 special Wis. Stat. § 815.18(3)(d) \$750.00 \$750.00 Line from Schedule A/B: 10.1 100% of fair market value, up to any applicable statutory limit Clothing Wis. Stat. § 815.18(3)(d) \$450.00 \$450.00 Line from Schedule A/B: 11.1 100% of fair market value, up to any applicable statutory limit wedding rings/jewelry (purchased at Wis. Stat. § 815.18(3)(d) \$2,000.00 \$2,000.00 Costco) Line from Schedule A/B: 12.1 100% of fair market value, up to any applicable statutory limit **Checking: Community First Credit** Wis. Stat. § 815.18(3)(k) \$848.00 \$848.00 Union Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit **Savings: Community First Credit** Wis. Stat. § 815.18(3)(k) \$24.00 \$24.00 Union Line from Schedule A/B: 17.2 100% of fair market value, up to any applicable statutory limit Checking: Wells Fargo Bank Wis. Stat. § 815.18(3)(k) \$248.00 \$248.00 Line from Schedule A/B: 17.3 100% of fair market value, up to any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$189,050? (Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment.)

☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
 ☐ No
 ☐ Yes

Debtor 1 Debtor 2 First Name United States Bankruptcy Court for the:  EASTERN DISTRICT OF WISCONSIN    Case number (Norway)	This in this informe	ation to identify you	ır case:			
Debtor 2 Yolanda C. Valencia    Case number   Case number   Case number	Debtor 1	David F. Valenc	ia			
Case number   Case number   Case Name   Case Name   Case Name   Case Name   Case number   Case num						
United States Bankruptcy Court for the: EASTERN DISTRICT OF WISCONSIN  Case number (# thorown)						
Case number  (if snown)    Check if this is an amended filing    Check if this is an amended the subject in the space is an amended filing    Check if this is an amended the space is an attain in the this form to the equilibrium and case and an amended the space is an amended the s		to Cot for the				
Official Form 106D  Schedule D: Creditors Who Have Claims Secured by Property  12/15  Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).  1. Do any creditors have claims secured by your property?    No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.   Yes, Fill in all of the information below.    Part 1: List All Secured Claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As mount of claim and in alphabetical order according to the creditors in Part 2. As mount of claim as upons this claim is apphabetical order according to the creditors in Part 2. As a mount of claim as upon the creditors in Part 2. As mount of claim as upon the creditors in Part 2. As a mount of claim as upon the creditors in Part 2. As a mount of claim as upon the creditors in Part 2. As a mount of claim as upon the creditors in Part 2. As a mount of claim as upon the creditors in Part 2. As a mount of claim as upon the creditors in Part 2. As a mount of claim as upon the creditors in Part 2. As a mount of claim as upon the creditors in Part 2. As a mount of claim as upon the creditors in Part 2. As a mount of claim as upon the creditors in Part 2. As a mount of claim as upon the creditors in Part 2. As a mount of claim as upon the creditors in Part 2. As a mount of claim as upon the creditors in Part 2. As a mount of claim as upon the creditors in Part 2. As a mount of claim as upon the creditors in Part 2. As a mount of claim as upon the creditors in Part 2. As a mount of claim as upon the creditors in Part 2. As a mount of claim as upon the creditors	United States Bank	Kruptcy Court for the	EASTERN DISTRICT OF WISCONSIN		-	
Official Form 106D  Schedule D: Creditors Who Have Claims Secured by Property  12/15  Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).  1. Do any creditors have claims secured by your property?    No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.   Yes. Fill in all of the information below.    Part 1:   List All secured claims   If a creditor has particular claim, list the creditor spaparately responsible for supplying correct information. If more and case number of any additional pages, write your name and case number of any additional pages, write your name and case number of any additional pages, write your name and case number of any additional pages, write your name and case number of any additional pages, write your name and case number of any additional pages, write your name and case number of any additional pages, write your name and case number of any additional pages, write your name and case number of any additional pages, write your name and case number of any additional pages, write your name and case number of any additional pages, write your name and case number of any additional pages, write your name and case number of any additional pages, write that needs or supplying correct information. If more than one creditors in the control of any additional pages, write that needs or supplying correct information. If more than one creditors in the toth in the page of any additional pages, write that needs or supplying correct information. If more than one creditors in the page of any additional pages, write your name and case number of any additional pages, write your name and case number of any additional pages, write your name and case num						
Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property  12/15  Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).  1. Do any creditors have claims secured by your property?    No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.   Yes. Fill in all of the information below.    Part 1	(if known)					
Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).  1. Do any creditors have claims secured by your property?    No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.   Yes. Fill in all of the information below.    Yes. Fill in all of the information below.   Yes. Fill in all of the infor					amend	aed illing
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).  1. Do any creditors have claims secured by your property?    No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.    Yes. Fill in all of the information below.    Yes. Fill in all of the information below.   Yes. Fill in all of the information below.	Official Form	106D				
is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).  1. Do any creditors have claims secured by your property?    No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.    Yes. Fill in all of the information below.    Part1: List All Secured Claims   List all secured claims. If a creditor has more than one secured claim, list the other creditors in Part 2. As mount of claim to not deduct the value of collateral that supports this creditor's name.   2.1 Freedom Mortgage	Schedule [	D: Creditors	Who Have Claims Secured	by Propert	У	12/15
Part 1: List All Secured Claims  2. List all secured claims. If a creditor has more than one secured claim, list the order creditors in Part 2. As particular claim, list the other creditors in Part 2. As advants of claim by the other creditors in Part 2. As a particular claim, list the other creditors in Part 2. As anount of claim by claim as upported that supports this claim as upported that supports this claim collected.  So defended the property that secures the claim: \$256,658.04  So defended the property that secures the claim: \$256,658.04  So defended the property that secures the claim: \$256,658.04  So defended the property that secures the claim: \$256,658.04  So defended the property that secures the claim: \$256,658.04  So defended the property that secures the claim: \$256,658.04  So defended the property that secures the claim: \$256,658.04  So d	is needed, copy the A number (if known).	Additional Page, fill it	out, number the entries, and attach it to this form. On			
2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.  2.1 Freedom Mortgage  Describe the property that secures the claim:  2540 Gaslight Court Oshkosh, WI 54904 Winnebago County Value listed is EFMV per 2021 tax bill which debtors believe to be accurate  As of the date you file, the claim is: Check all that apply.  Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 and Debtor 2 only Debtor 4 and Debtor 2 only Debtor 5 and Debtor 2 only Last 4 digits of account number Check if this claim relates to a community debt  Date debt was incurred  Last 4 digits of account number personness of the debtors and on this page. Write that number here:  2. List all secured claims. If a creditor has more than one secured claim, list the creditor's neare.  Amount of claim Do not deduct the value of collateral that supports this claim Do not deduct the value of collateral.  \$256,658.04  \$338,120.00  \$0.	☐ No. Check t	his box and submit t	his form to the court with your other schedules. Yo	u have nothing else t	o report on this form.	
2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As mount of claim bo not deduct the value of collateral the value of collateral.  2.1 Freedom Mortgage	Yes. Fill in a	all of the information	below.			
2. List all secured claims. If a creditor has more than one secured than one secured other creditors in Part 2. A mount of claim pont of deduct the quale of collateral that supports this value of collateral	Part 1: List All	Secured Claims				
much as possible, list the claims in alphabetical order according to the creditor's name.    2.1   Freedom Mortgage   Describe the property that secures the claim: \$256,658.04   \$338,120.00   \$0.00     2540 Gaslight Court Oshkosh, WI 54904   Winnebago County Value listed is EFMV per 2021 tax bill which debtors believe to be accurate   As of the date you file, the claim is: Check all that apply.   Contingent   Unliquidated   Disputed   Nature of lien. Check all that apply.   An agreement you made (such as mortgage or secured car loan)   Statutory lien (such as tax lien, mechanic's lien)   Judgment lien from a lawsuit   Other (including a right to offset)   Other (including a right to offset)   Other (including a right to offset)   \$256,658.04   \$256,658.04   \$338,120.00   \$0.00		laims. If a creditor has	more than one secured claim, list the creditor separately	Column A	Column B	Column C
2540 Gaslight Court Oshkosh, WI 54904 Winnebago County Value listed is EFMV per 2021 tax bill which debtors believe to be accurate   PO Box 6656				Do not deduct the	that supports this	portion
PO Box 6656 Chicago, IL 60680-6656 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt  Date debt was incurred  Last 4 digits of account number  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Other (including a right to offset) Check if this claim relates to a community debt  Date debt was incurred  Last 4 digits of account number 9658  Add the dollar value of your entries in Column A on this page. Write that number here: \$256,658.04		lortgage	Describe the property that secures the claim:	\$256,658.04	\$338,120.00	
Chicago, IL 60680-6656   Number, Street, City, State & Zip Code   Unliquidated   Disputed	Creditor's Name		54904 Winnebago County Value listed is EFMV per 2021 tax bill which debtors believe to be			
Chicago, IL 60680-6656   Contingent   Unliquidated   Disputed			abounde			
Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt  Date debt was incurred  Last 4 digits of account number 9658  Add the dollar value of your entries in Column A on this page. Write that number here:  \$\begin{align*} Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan)  Statutory lien (such as tax lien, mechanic's lien)  Judgment lien from a lawsuit  Other (including a right to offset)  Last 4 digits of account number 9658	PO Box 665	56	As of the date you file, the claim is: Check all that			
Who owes the debt? Check one.  □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim relates to a community debt  Date debt was incurred  Last 4 digits of account number 9658  Add the dollar value of your entries in Column A on this page. Write that number here:  \$256,658.04			As of the date you file, the claim is: Check all that apply.			
□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim relates to a community debt  □ Date debt was incurred □ Last 4 digits of account number 9658  Add the dollar value of your entries in Column A on this page. Write that number here:  \$\frac{1}{256,658.04}\$	Chicago, IL	60680-6656	As of the date you file, the claim is: Check all that apply.  Contingent			
Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt  Date debt was incurred  Last 4 digits of account number 9658  Add the dollar value of your entries in Column A on this page. Write that number here:  \$256,658.04	Chicago, IL	<b>. 60680-6656</b> City, State & Zip Code	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed			
Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt  Date debt was incurred  Last 4 digits of account number 9658  Add the dollar value of your entries in Column A on this page. Write that number here:  \$256,658.04	Chicago, IL  Number, Street, C	<b>. 60680-6656</b> City, State & Zip Code	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.			
□ At least one of the debtors and another □ Check if this claim relates to a community debt  □ Date debt was incurred □ Last 4 digits of account number 9658  Add the dollar value of your entries in Column A on this page. Write that number here: \$256,658.04	Chicago, IL  Number, Street, C  Who owes the deb	<b>. 60680-6656</b> City, State & Zip Code	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or sect	ıred		
Date debt was incurred Last 4 digits of account number 9658  Add the dollar value of your entries in Column A on this page. Write that number here: \$256,658.04	Chicago, IL  Number, Street, C  Who owes the deb  Debtor 1 only  Debtor 2 only	2. 60680-6656 City, State & Zip Code 17. Check one.	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or sect car loan)	ıred		
Add the dollar value of your entries in Column A on this page. Write that number here: \$256,658.04	Chicago, IL  Number, Street, C  Who owes the debt  Debtor 1 only  Debtor 2 only  Debtor 1 and Debt	c. 60680-6656  City, State & Zip Code  t? Check one.	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secucar loan) Statutory lien (such as tax lien, mechanic's lien)	ıred		
Matter than the control of the contr	Chicago, IL  Number, Street, C  Who owes the debt  Debtor 1 only  Debtor 2 only  Debtor 1 and Debt  At least one of the  Check if this clai	c. 60680-6656  City, State & Zip Code  t? Check one.  Autor 2 only te debtors and another tim relates to a	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secucar loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit	ıred		
Matter than the control of the contr	Chicago, IL  Number, Street, C  Who owes the debt  Debtor 1 only  Debtor 2 only  Debtor 1 and Debt  At least one of the  Check if this claicommunity debt	a. 60680-6656  City, State & Zip Code  At? Check one.  Ator 2 only a debtors and another aim relates to a	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secucar loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)	ured		
	Chicago, IL  Number, Street, C  Who owes the debt  Debtor 1 only  Debtor 2 only  Debtor 1 and Debt  At least one of the  Check if this clai community debt  Date debt was incur	a 60680-6656  City, State & Zip Code  t? Check one.  citor 2 only e debtors and another im relates to a  t  red	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or sect car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)  Last 4 digits of account number  9658		58 04	

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

Fill in this infor	mation to identify your case:				
Debtor 1	David F. Valencia				
	First Name Mi	ddle Name Last Name			
Debtor 2 (Spouse if, filing)	Yolanda C. Valencia First Name Mic	ddle Name Last Name			
(Spouse II, IIIIIIg)					
United States Ba	ankruptcy Court for the: EASTE	RN DISTRICT OF WISCONSIN			
Case number					
(if known)		<del></del>		☐ Check	if this is an
				amend	ed filing
Official For	~ 106E/E				
Official For		ove Headermad Claims			40/45
		ave Unsecured Claims or creditors with PRIORITY claims and Part 2 for			12/15
eft. Attach the Co ame and case nu	ntinuation Page to this page. If you h mber (if known).	roperty. If more space is needed, copy the Part lave no information to report in a Part, do not f			
	All of Your PRIORITY Unsecured				
	ors have priority unsecured claims a	ngainst you?			
☐ No. Go to	Part 2.				
Yes.					
identify what to possible, list the	ype of claim it is. If a claim has both price	itor has more than one priority unsecured claim, lis ority and nonpriority amounts, list that claim here a g to the creditor's name. If you have more than tw im, list the other creditors in Part 3.	nd show both priority a	nd nonpriority amount	s. As much as
(For an explar	nation of each type of claim, see the ins	tructions for this form in the instruction booklet.)			
			Total claim	Priority amount	Nonpriority amount
2.1 Interna	Il Revenue Service	Last 4 digits of account number	\$56,096.88	\$56,096.88	\$0.00
	reditor's Name		Ψοσ,σοσ.σο	Ψου,υσυ.υυ	Ψ0.00
	lized Insolvency Operation	When was the debt incurred?			
_	ox 7346 elphia, PA 19101-7346				
	Street City State Zip Code	As of the date you file, the claim is: Check a	Ill that apply		
Who incurre	ed the debt? Check one.	☐ Contingent			
Debtor 1	only	☐ Unliquidated			
Debtor 2	only	☐ Disputed			
Debtor 1	and Debtor 2 only	Type of PRIORITY unsecured claim:			
	one of the debtors and another	☐ Domestic support obligations			
	this claim is for a community debt	■ Taxes and certain other debts you owe the	government		
	subject to offset?	☐ Claims for death or personal injury while yo	•		
No	aunjeet to onaet?	Other. Specify			
☐ Yes		Form 1040 income	taxes for 2007, 2	010, 2018 and	
_ 103		2019 - all but 2019		-	

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1				
Wisconsin Department of	Lord British Comment	Unknown	\$0.00	\$0.0
Revenue Priority Creditor's Name	Last 4 digits of account number		<del>φυ.υυ</del> –	φυ.(
P.O. Box 8981	When was the debt incurred?			
Madison, WI 53708-8981	A control of the state of the s			
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Chec	call that apply		
Debtor 1 only	☐ Contingent			
_ '	Unliquidated			
Debtor 2 only	☐ Disputed			
■ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:			
$\square$ At least one of the debtors and another	☐ Domestic support obligations			
■ Check if this claim is for a community debt	Taxes and certain other debts you owe to	ne government		
Is the claim subject to offset?	☐ Claims for death or personal injury while	you were intoxicated		
■ No	Other. Specify			
Yes	Notice only			
<ul> <li>No. You have nothing to report in this part. Submit</li> <li>Yes.</li> </ul> List all of your nonpriority unsecured claims in the	this form to the court with your other schedules	Is each claim. If a creditor has r		
No. You have nothing to report in this part. Submit  Yes.  List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each chan one creditor holds a particular claim, list the other.	this form to the court with your other schedules alphabetical order of the creditor who hole claim. For each claim listed, identify what type o	Is each claim. If a creditor has r	eady included in Par	rt 1. If more
No. You have nothing to report in this part. Submit  Yes.  List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each chan one creditor holds a particular claim, list the other part 2.	this form to the court with your other schedules alphabetical order of the creditor who hold laim. For each claim listed, identify what type or creditors in Part 3.If you have more than three	Is each claim. If a creditor has r	eady included in Par	rt 1. If more n Page of m
No. You have nothing to report in this part. Submit  Yes.  ist all of your nonpriority unsecured claims in the insecured claim, list the creditor separately for each chan one creditor holds a particular claim, list the other eart 2.  American Express	this form to the court with your other schedules alphabetical order of the creditor who hole claim. For each claim listed, identify what type o	Is each claim. If a creditor has r	eady included in Par I out the Continuatio	rt 1. If more n Page of m
No. You have nothing to report in this part. Submit  Yes.  ist all of your nonpriority unsecured claims in the nsecured claim, list the creditor separately for each chan one creditor holds a particular claim, list the other eart 2.  American Express  Nonpriority Creditor's Name  c/o Nationwide Credit  PO Box 15130	this form to the court with your other schedules alphabetical order of the creditor who hold laim. For each claim listed, identify what type or creditors in Part 3.If you have more than three	Is each claim. If a creditor has r	eady included in Par I out the Continuatio	rt 1. If more n Page of <b>m</b>
No. You have nothing to report in this part. Submit  Yes.  ist all of your nonpriority unsecured claims in the nsecured claim, list the creditor separately for each can one creditor holds a particular claim, list the other lart 2.  American Express  Nonpriority Creditor's Name  c/o Nationwide Credit	this form to the court with your other schedules e alphabetical order of the creditor who hold claim. For each claim listed, identify what type o r creditors in Part 3.If you have more than three  Last 4 digits of account number	Is each claim. If a creditor has r f claim it is. Do not list claims alr nonpriority unsecured claims fil	eady included in Par I out the Continuatio	rt 1. If more n Page of <b>m</b>
No. You have nothing to report in this part. Submit  Yes.  ist all of your nonpriority unsecured claims in the insecured claim, list the creditor separately for each conan one creditor holds a particular claim, list the other eart 2.  American Express  Nonpriority Creditor's Name  c/o Nationwide Credit  PO Box 15130  Wilmington, DE 19850  Number Street City State Zip Code	this form to the court with your other schedules e alphabetical order of the creditor who hole claim. For each claim listed, identify what type or r creditors in Part 3.If you have more than three  Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim is: Ch	Is each claim. If a creditor has r f claim it is. Do not list claims alr nonpriority unsecured claims fil	eady included in Par I out the Continuatio	rt 1. If more n Page of <b>m</b>
No. You have nothing to report in this part. Submit  Yes.  ist all of your nonpriority unsecured claims in the insecured claim, list the creditor separately for each chan one creditor holds a particular claim, list the other art 2.  American Express Nonpriority Creditor's Name  c/o Nationwide Credit  PO Box 15130  Wilmington, DE 19850  Number Street City State Zip Code  Who incurred the debt? Check one.	this form to the court with your other schedules alphabetical order of the creditor who hold claim. For each claim listed, identify what type o r creditors in Part 3.If you have more than three  Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim is: Ch	Is each claim. If a creditor has r f claim it is. Do not list claims alr nonpriority unsecured claims fil	eady included in Par I out the Continuatio	rt 1. If more n Page of m
No. You have nothing to report in this part. Submit  Yes.  ist all of your nonpriority unsecured claims in the needured claim, list the creditor separately for each chan one creditor holds a particular claim, list the other art 2.  American Express Nonpriority Creditor's Name c/o Nationwide Credit PO Box 15130 Wilmington, DE 19850 Number Street City State Zip Code Who incurred the debt? Check one.  □ Debtor 1 only	this form to the court with your other schedules  alphabetical order of the creditor who hold claim. For each claim listed, identify what type o r creditors in Part 3.If you have more than three  Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim is: Ch	Is each claim. If a creditor has r f claim it is. Do not list claims alr nonpriority unsecured claims fil	eady included in Par I out the Continuatio	rt 1. If more n Page of <b>m</b>
No. You have nothing to report in this part. Submit  Yes.  ist all of your nonpriority unsecured claims in the necured claim, list the creditor separately for each chan one creditor holds a particular claim, list the other art 2.  American Express  Nonpriority Creditor's Name c/o Nationwide Credit PO Box 15130 Wilmington, DE 19850  Number Street City State Zip Code Who incurred the debt? Check one.  □ Debtor 1 only □ Debtor 2 only	this form to the court with your other schedules alphabetical order of the creditor who hold claim. For each claim listed, identify what type o r creditors in Part 3.If you have more than three  Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim is: Ch	Is each claim. If a creditor has reference of claim it is. Do not list claims alrest nonpriority unsecured claims file.	eady included in Par I out the Continuatio	rt 1. If more n Page of <b>m</b>
No. You have nothing to report in this part. Submit  Yes.  ist all of your nonpriority unsecured claims in the neecured claim, list the creditor separately for each chan one creditor holds a particular claim, list the other lart 2.  American Express Nonpriority Creditor's Name c/o Nationwide Credit PO Box 15130 Wilmington, DE 19850 Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only  At least one of the debtors and another	this form to the court with your other schedules  alphabetical order of the creditor who hold claim. For each claim listed, identify what type o r creditors in Part 3.If you have more than three  Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim is: Ch	Is each claim. If a creditor has reference of claim it is. Do not list claims alrest nonpriority unsecured claims file.	eady included in Par I out the Continuatio	rt 1. If more n Page of <b>m</b>
No. You have nothing to report in this part. Submit  Yes.  List all of your nonpriority unsecured claims in the insecured claim, list the creditor separately for each chan one creditor holds a particular claim, list the other art 2.  American Express Nonpriority Creditor's Name C/o Nationwide Credit PO Box 15130 Wilmington, DE 19850 Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only  Debtor 1 and Debtor 2 only	this form to the court with your other schedules  e alphabetical order of the creditor who hold  claim. For each claim listed, identify what type o  r creditors in Part 3.If you have more than three  Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim is: Ch  Contingent  Unliquidated  Disputed  Type of NONPRIORITY unsecured clai	Is each claim. If a creditor has reference to the claim it is. Do not list claims also nonpriority unsecured claims file to the	ready included in Par I out the Continuatio	rt 1. If more n Page of m
Nonpriority Creditor's Name c/o Nationwide Credit PO Box 15130 Wilmington, DE 19850  Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt	this form to the court with your other schedules  alphabetical order of the creditor who hold claim. For each claim listed, identify what type or r creditors in Part 3.If you have more than three  Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim is: Ch  Contingent  Unliquidated  Disputed  Type of NONPRIORITY unsecured clai  Student loans  Obligations arising out of a separation	Is each claim. If a creditor has reference to the claim it is. Do not list claims also nonpriority unsecured claims fill end of the control o	ready included in Par I out the Continuatio	rt 1. If more n Page of

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tor 2 Yolanda C. Valencia	Case number (if known)	
Aurora Health Care	Last 4 digits of account number	\$11,143.00
Nonpriority Creditor's Name PO Box 0909996 Milwaukee, WI 53209-0996	When was the debt incurred?	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
☐ At least one of the debtors and an		
Check if this claim is for a com		
debt	Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify medical services	
Aurora Health Care	Last 4 digits of account number	\$7,457.0
Nonpriority Creditor's Name PO Box 0909996	When was the debt incurred?	
Milwaukee, WI 53209-0996		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and an	other Type of NONPRIORITY unsecured claim:	
■ Check if this claim is for a com	nunity	
debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify medical services	
Beattie Ashmore, receiver	Last 4 digits of account number	Unknow
Nonpriority Creditor's Name c/o Atty Lewis Walter Tollis 18B Marckley St.	on When was the debt incurred? 2013 - 2017	
Greenville, SC 29601  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	Contingent	
Debtor 2 only	■ Unliquidated	
■ Debtor 1 and Debtor 2 only	■ Disputed	
☐ At least one of the debtors and an	other Type of NONPRIORITY unsecured claim:	
	nunity	

☐ Yes

Official Form 106 E/F

■ No

Schedule E/F: Creditors Who Have Unsecured Claims

■ Other. Specify scheme.

 $\square$  Obligations arising out of a separation agreement or divorce that you did not

earned over rides from sales

Suit for clawback of fees earned from Future Income Payments, LLC et al. Debtor

representatives/Life Insurance Advisors who sole products of the LLC which were later determined to be a "ponzi" like

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 $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

report as priority claims

Debtor 1 David F. Valencia Debtor 2 Yolanda C. Valencia Case number (if known) Last 4 digits of account number \$12,018.00 4.5 **Capital One** Nonpriority Creditor's Name c/o Financial Recovery Services When was the debt incurred? PO Box 385908 Minneapolis, MN 55438-5908 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ■ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify credit card purchases ☐ Yes 4.6 \$8,545.00 Citibank Last 4 digits of account number Nonpriority Creditor's Name c/o Halsted Financial Services When was the debt incurred? PO Box 828 Skokie. IL 60076 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed ☐ At least one of the debtors and another Type of NONPRIORITY unsecured claim: ☐ Student loans ■ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify credit card purchases ☐ Yes 4.7 **Credit One** Last 4 digits of account number \$460.99 Nonpriority Creditor's Name c/o Midland Credit When was the debt incurred? 350 Camino De La Reina, Suite 100 San Diego, CA 92108 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one.

 ■ Check if this claim is for a community debt
 □ Student loans

 Is the claim subject to offset?
 □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

 ■ No
 □ Debts to pension or profit-sharing plans, and other similar debts

 □ Yes
 ■ Other. Specify

Credit card purchases

☐ Contingent

■ Unliquidated

☐ Disputed

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

Type of NONPRIORITY unsecured claim:

Debtor Debtor	<ul><li>David F. Valencia</li><li>Yolanda C. Valencia</li></ul>	Case number (if known)	
4.8	Greg Scianna	Last 4 digits of account number	\$14,000.00
	Nonpriority Creditor's Name 470 Saddle Ridge Road Hamilton, MT 59840	When was the debt incurred?	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent	
	<u> </u>	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	■ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify unsecured loan	
4.9	John Schieck	Last 4 digits of account number	\$15,000.00
	Nonpriority Creditor's Name 2010 S Oakwood Road	When was the debt incurred?	
	Oshkosh, WI 54904  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	_	
	_	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	■ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify unsecured loan	
4.1	Luis Fierro	Last 4 digits of account number	\$3,000.00
	Nonpriority Creditor's Name 2540 Gaslight Court	When was the debt incurred?	
	Oshkosh, WI 54904  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	_	
	Debtor 2 only	☐ Contingent	
	<u> </u>	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	■ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	

☐ Yes

■ Other. Specify unsecured loan

Page 25 of 58

	or 1 David F. Valencia or 2 Yolanda C. Valencia	Case number (if known)	
4.1	Michael Barbaria	Local Adigita of account number	\$2,500.00
1	Nonpriority Creditor's Name 4706 Jonagold Place Caldwell, ID 83607	Last 4 digits of account number  When was the debt incurred?	Ψ2,300.00
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	■ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify unsecured loan	
4.1	Paul Valencia	Last 4 digits of account number	\$2,500.00
	Nonpriority Creditor's Name 1021 Diadem Drive San Jose, CA 95116	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	■ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify unsecured loan	
4.1	Sears	Last 4 digits of account number	\$2,471.00
	Nonpriority Creditor's Name c/o Messerli Kramer 3033 Campus Drive, Suite 250 Minneapolis, MN 55441	When was the debt incurred?	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	Пол	
	☐ Debtor 2 only	☐ Contingent	
	Debtor 1 and Debtor 2 only	☐ Unliquidated	
	☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecured claim:	
	- / " least tile of the depities and another	rype or reciti intenti i unoccureu ciailli.	

debt

No

☐ Yes

 $\hfill \square$  Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify credit card purchases

■ Check if this claim is for a community

Is the claim subject to offset?

☐ Student loans

report as priority claims

Debto Debto	or 1 David F. Valencia Or 2 Yolanda C. Valencia	Case number (if known)	
4.1	Synchrony Bank	Last 4 digits of account number	\$3,738.00
	Nonpriority Creditor's Name c/o Client Services 3451 Harry S Truman Blvd Saint Charles, MO 63301	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	■ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify credit card purchases	
4.1 5	Thomas D. Sherman, Esq.	Last 4 digits of account number	\$74,360.00
	Nonpriority Creditor's Name Locke Lord LLP Terminus 200 Suite 1200	When was the debt incurred?	
	333 Piedmont Road, NE Atlanta, GA 30305		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only  □ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecured claim:	
	_	Student loans	
	Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not	
	<u> </u>	report as priority claims  ☐ Debts to pension or profit-sharing plans, and other similar debts	
	■ No		
	Yes	Other. Specify legal services	
4.1 6	Verizon	Last 4 digits of account number	\$346.00
	Nonpriority Creditor's Name c/o CBE Group, Inc. PO Box 2632	When was the debt incurred?	
	Waterloo, IA 50704-2635  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	■ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	

Official Form 106 E/F

■ No

☐ Yes

Schedule E/F: Creditors Who Have Unsecured Claims

■ Other. Specify goods/services

 $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

Yolanda C. Valencia	Case number (if known)	
Wells Fargo	Last 4 digits of account number	\$17,090.0
Nonpriority Creditor's Name		<b>*</b> * * <b>,</b> * * * * * * * * * * * * * * * * * * *
c/o Halsted Financial Services	When was the debt incurred?	
PO Box 828 Skokie, IL 60076		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify credit card purchases	
Wells Fargo	Last 4 digits of account number	\$3,167.0
Nonpriority Creditor's Name	Last 4 digits of account number	ψο, το τ.ο
PO Box 10647	When was the debt incurred?	
Des Moines, IA 50306  Number Street City State Zip Code	As of the date you file the elements Observed that such	
Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only		
_	Contingent	
Debtor 2 only	Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
<u> </u>	□ Debts to pension or profit-sharing plans, and other similar debts	
■ No □ Yes	Other. Specify	
	· · ·	
Wells Fargo	Last 4 digits of account number	\$2,332.0
Nonpriority Creditor's Name	When was the debt incurred?	
7831 Glenroy Road, Suite 250-A	יייים שמש נווכ עבטג וווכעוופע:	
Minneapolis, MN 55439		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	

debt

■ No

☐ Yes

 $\hfill \Box$  Obligations arising out of a separation agreement or divorce that you did not

■ Other. Specify credit card purchases with Bob's Furniture

 $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

☐ Student loans

report as priority claims

■ Check if this claim is for a community

Is the claim subject to offset?

Debtor 1 David F. Valencia Debtor 2 Yolanda C. Valencia

Case number (if known)

4.2 0	Woodbridge Liquidation Trust	Last 4 digits of account number	\$35,000.00
	Nonpriority Creditor's Name Attn: Michael Goldberg, Liq. Trustee	When was the debt incurred?	
	c/o Attorney Jeffrey Nolan 10100 Santa Monica Blvd, 13th		
	Floor Los Angeles, CA 90067 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	■ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	payments due pursuant to Settlement Agreement resolving preferential/fraudulent conveyance claims between parties	

#### Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
otal laims				
om Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 56,096.88
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 56,096.88
				Total Claim
	6f.	Student loans	6f.	\$ 0.00
otal laims				
om Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 220,343.99
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 220,343.99

Fill in this infor	mation to identify your	case:		
Debtor 1	David F. Valencia			
	First Name	Middle Name	Last Name	
Debtor 2	Yolanda C. Valen			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F WISCONSIN	
Case number _				
(if known)				Check if this is an
				amended filing

### Official Form 106G

## **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with Name, Number	whom you have th , Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
.1					
	Name				
	Number	Street			
	City		State	ZIP Code	_
.2					
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.3					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	<u> </u>

Fill in this infe	umation to identify your			
	rmation to identify your			
Debtor 1	David F. Valencia	Middle Name	Last Name	
Debtor 2	Yolanda C. Valen			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	EASTERN DISTRICT OF V	VISCONSIN	
Case number				
(if known)				☐ Check if this is an amended filing
Official Fo	orm 106H			
		abtera		
<u>Scheaule</u>	H: Your Cod	eptors		12/15
■ No □ Yes  2. Within the Arizona, Ca □ No. Go to	ne last 8 years, have you alifornia, Idaho, Louisiana o line 3. your spouse, former spo	you are filing a joint case, do r I lived in a community prope Nevada, New Mexico, Puerto use, or legal equivalent live wi	erty state or territory o Rico, Texas, Washin	? (Community property states and territories include
■ Ye	-			
	In which community stat  Debtors both reside	e or territory did you live? in Wisconsin	Wisconsin	. Fill in the name and current address of that person.
	Name of your spouse, former sp			
in line 2 ag	gain as a codebtor only i )), Schedule E/F (Officia	ors. Do not include your spo f that person is a guarantor	or cosigner. Make s	f your spouse is filing with you. List the person shown ure you have listed the creditor on Schedule D (Officia G). Use Schedule D, Schedule E/F, or Schedule G to f
	mn 1: Your codebtor Number, Street, City, State and Z	P Code		Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3.1				☐ Schedule D, line
Name				☐ Schedule E/F, line
				☐ Schedule G, line
Numbe City	er Street	State	ZIP Code	
22				□ Sabadula D. lice
3.2 Name				☐ Schedule D, line ☐ Schedule E/F, line
				☐ Schedule G, line
Numbe	er Street			
City		State	7IP Code	

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Schedule H: Your Codebtors

						•				
	in this information to identify you btor 1 David F.									
	ouse, if filing) Yolanda	C. Valencia								
Uni	ited States Bankruptcy Court for	the: EASTERN DISTRICT	OF WISCONSIN							
_	se number		_			Check if this is:				
(If kr	nown)					An amende	Ū			
								g postpetition chapter bllowing date:		
0	fficial Form 106I					MM / DD/ Y	YYY			
S	chedule I: Your Ir	come						12/15		
sup spo atta	as complete and accurate as p plying correct information. If y use. If you are separated and ch a separate sheet to this for tt 1: Describe Employme	ou are married and not fili your spouse is not filing w m. On the top of any additi	ng jointly, and your s ith you, do not includ	spouse de infor	is liv matic	ing with you, inclu on about your spo	ude inforn ouse. If mo	nation about your ore space is needed,		
1.	Fill in your employment		Debtor 1			Debtor 2 or non-filing spouse				
	information.					_	_			
	If you have more than one job, attach a separate page with	Employment status	■ Employed				■ Employed			
	information about additional employers.		☐ Not employed			☐ Not er	. ,			
	Include part-time, seasonal, o	Occupation	Self-Employed			Caregiv	regiver for Daughter			
	self-employed work.	Employer's name	Sporadic fees earned			Outread	Outreach Fiscal Agent			
	Occupation may include stude or homemaker, if it applies.	Occupation may include student <b>Employer's address</b> or homemaker, if it applies.					Baseline AZ 85206	Rd, Suite 200		
		How long employed t	here?			3	5 years			
Pai	rt 2: Give Details About	Monthly Income								
	mate monthly income as of thuse unless you are separated.	e date you file this form. If	you have nothing to re	eport for	any	line, write \$0 in the	space. Inc	clude your non-filing		
	ou or your non-filing spouse have e space, attach a separate shee		ombine the information	n for all	emplo	oyers for that perso	n on the lir	nes below. If you need		
						For Debtor 1		otor 2 or ng spouse		
2.	List monthly gross wages, s deductions). If not paid month			2.	\$	0.00	\$	0.00		
3	Estimate and list monthly or	vertime nav		3	+\$	0.00	+\$	0.00		

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Calculate gross Income. Add line 2 + line 3.

0.00

\$

0.00

Case number (if known)

				For I	Debtor 1		Debtor	2 or spouse	
С	ору	r line 4 here	4.	\$	0.00	\$	illing c	0.00	
L	ist a	all payroll deductions:							_
	a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$		0.00	
	b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$		0.00	_
	C.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$		0.00	_
5	d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$		0.00	_
5	e.	Insurance	5e.	\$	0.00	\$		0.00	_
5	f.	Domestic support obligations	5f.	\$	0.00	\$		0.00	_
5	g.	Union dues	5g.	\$	0.00	\$		0.00	_
5	h.	Other deductions. Specify:	_ 5h.+	\$	0.00	+ \$		0.00	_
Α	dd t	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.00	\$		0.00	_
C	alcı	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	0.00	\$		0.00	_
	a.	All other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$		0.00	
8	b.	Interest and dividends	8b.	\$	0.00	\$		0.00	_
8	c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$		0.00	_
R	d.	Unemployment compensation	8d.	\$	0.00	\$		0.00	_
	e.	Social Security	8e.	\$—	0.00	\$		0.00	_
8	f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$		0.00	-
8	g.	Pension or retirement income	_ 8g.	\$	0.00	\$		0.00	_
	•	Stipend from son for	ŭ						_
8	h.	Other monthly income. Specify: advice/training	8h.+	\$	3,500.00	+ \$		0.00	
		Kindred Care State of Wisconsin (disabled Daughter)	_	\$	0.00	\$	2	,200.00	_
Α	dd a	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	3,500.00	\$	;	2,200.0	0
								1	
		ulate monthly income. Add line 7 + line 9.  the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$_	3	,500.00 + \$	2,20	00.00	= \$ _	5,700.0
Ir o D	ncluc ther	e all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your of friends or relatives. On include any amounts already included in lines 2-10 or amounts that are not a sify:	depend					e J. +\$	0.0
٧		the amount in the last column of line 10 to the amount in line 11. The result that amount on the Summary of Schedules and Statistical Summary of Certaines					12.	\$	5,700.
								Combi	ned ly income

Official Form 106I

Yes. Explain:

(W) gets kindred care for special needs daughter. (H) provised substantial advice to son who is in the financial services area. Son basically takes care of parents until they can get back on their feet.

						ı					
Fill	in this informa	ation to identify yo	our case:								
Deb	David F. Valencia						Check if this is:				
							An amended filing				
	otor 2 ouse, if filing)	Yolanda C. V	/alencia				A supplement shown 13 expenses as of	wing postpetition chapter the following date:			
Unit	ed States Bank	ruptcy Court for the	: EASTE	RN DISTRICT OF WISCO	NSIN		MM / DD / YYYY				
!	e number nown)										
Of	fficial Fo	rm 106J									
		J: Your	Fynar	1606				12/15			
Be info	as complete ormation. If m	and accurate as	possible eded, atta	. If two married people ar ch another sheet to this				or supplying correct			
		ribe Your House	hold								
1.	Is this a join										
	□ No. Go to	o line 2. es Debtor 2 live i	in a canar	oto household?							
	_		iii a Sepai	ate nousenoid?							
	■ N □ Y		st file Offici	al Form 106J-2, Expenses	s for Separate House	hold of De	ebtor 2.				
2.	Do you hav	e dependents?	□ No								
	Do not list D Debtor 2.	ebtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relati		Dependent's age	Does dependent live with you?			
	Do not state	the						□ No			
	dependents	names.			Daughter		15	Yes			
					<b>D</b>		0.5	□ No			
					Daughter		35	■ Yes			
								□ No □ Yes			
								☐ Yes			
								☐ Yes			
3.	expenses o	penses include f people other t d your depende	han $_{\square}$	No Yes							
Est exp app Incl the	imate your expenses as of a plicable date.  Iude expense value of suc	a date after the less paid for with the less	our bankr bankruptc non-cash	y Expenses uptcy filing date unless y y is filed. If this is a supp government assistance is cluded it on Schedule I: 1	olemental <i>Schedule</i> f you know		the box at the top o	f the form and fill in the			
`	ficial Form 10	,					Your exp	enses			
4.		or nome owners and any rent for the		ses for your residence. I or lot.	nclude first mortgage	4.	\$	2,190.45			
	If not include	ded in line 4:									
	4a. Real	estate taxes				4a.	\$	0.00			
		rty, homeowner's				4b.	· · · · · · · · · · · · · · · · · · ·	0.00			
		maintenance, re owner's associat	•	upkeep expenses		4c.	· : ————	0.00			
5.				oominium dues our residence, such as ho	me equity loans	4d. 5.	·	0.00 0.00			
			,	•							

Schedule J: Your Expenses Official Form 106J

page 1

David F. Valencia Debtor 1 Debtor 2 Yolanda C. Valencia Case number (if known) **Utilities:** 6a. Electricity, heat, natural gas 6a. \$ 300.00 6b. Water, sewer, garbage collection 6b. \$ 140.00 Telephone, cell phone, Internet, satellite, and cable services 6c. \$ 6c. 239.00 6d. Other. Specify: 6d. \$ 0.00 Food and housekeeping supplies 7. \$ 600.00 Childcare and children's education costs 8. \$ 0.00 Clothing, laundry, and dry cleaning 9. \$ 50.00 Personal care products and services 10. \$ 80.00 Medical and dental expenses 11. 25.00 12. Transportation. Include gas, maintenance, bus or train fare. 450.00 12. \$ Do not include car payments. 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 200.00 14. Charitable contributions and religious donations 14. \$ 100.00 Do not include insurance deducted from your pay or included in lines 4 or 20. 400.00 15a. Life insurance 15a. \$ 15b. Health insurance 15b. \$ 0.00 15c. Vehicle insurance 15c. \$ 208.00 15d. Other insurance. Specify: 15d. \$ 0.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. \$ 0.00 Installment or lease payments: 17a. Car payments for Vehicle 1 17a. \$ 0.00 17b. Car payments for Vehicle 2 17b. \$ 0.00 17c. Other. Specify: 17c. \$ 0.00 17d. Other. Specify: 17d. \$ 0.00 18. Your payments of alimony, maintenance, and support that you did not report as 0.00 18. \$ deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). Other payments you make to support others who do not live with you. 0.00 19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 0.00 20a. Mortgages on other property 20a. \$ 20b. Real estate taxes 20b. \$ 0.00 20c. Property, homeowner's, or renter's insurance 20c. \$ 0.00 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00 20e. Homeowner's association or condominium dues 20e. \$ 0.00 21. Other: Specify: Tuition for child 21. +\$ 250.00 22. Calculate your monthly expenses 22a. Add lines 4 through 21. 5,232.45 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 \$ 22c. Add line 22a and 22b. The result is your monthly expenses. 5,232.45 23. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$ 5,700.00 23b. Copy your monthly expenses from line 22c above. 23b. -\$ 5,232.45 23c. Subtract your monthly expenses from your monthly income. 467.55 23c. The result is your monthly net income. 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

Official Form 106J Schedule J: Your Expenses page 2

Explain here: Need to get health insurance.

☐ No.

Yes.

Fill in this inforr	mation to identify your	case:					
Debtor 1	David F. Valencia	1					
	First Name	Middle Name	Last	Name			
Debtor 2	Yolanda C. Valen	cia					
(Spouse if, filing)	First Name	Middle Name	Last	Name			
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	F WISCONS	IN			
Case number							
(if known)							Check if this is an amended filing
Official Forn							
Declarat	tion About a	an Individual	Debto	or's Sc	hedules		12/15
	8 U.S.C. §§ 152, 1341, <i>1</i> n Below	l519, and 3571.					
Did you pa	y or agree to pay some	eone who is NOT an attor	rney to help	you fill out ba	ankruptcy forms?		
■ No							
☐ Yes. N	Name of person						tition Preparer's Notice, ature (Official Form 119)
	ilty of perjury, I declare e true and correct.	that I have read the sum	mary and so	hedules filed	d with this declarati	on and	
X /s/ Dav	vid F. Valencia		Х	/s/ Yolanda	a C. Valencia		
	F. Valencia			Yolanda C.			
	re of Debtor 1			Signature of I			
Date _	April 21, 2022			Date <b>April</b>	il 21, 2022		

Official Form 106Dec

**Declaration About an Individual Debtor's Schedules** 

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Best Case Bankruptcy

Fil	I in this informa	tion to identify you	r case:			
De	btor 1	David F. Valenci	a			
_		First Name	Middle Name	Last Name		
	btor 2 ouse if, filing)	Yolanda C. Valer	ncia Middle Name	Last Name		
		ruptcy Court for the:	EASTERN DISTRICT OF	WISCONSIN		
Oil	illeu States Darik	rupicy Court for the.	LASTERN DISTRICT OF	WISCONSIN		
	se number				ПС	heck if this is an
(	nown,					mended filing
						<b>5</b>
$\bigcirc$	fficial Ear	m 107				
	fficial Form		Affaira far Individ	luala Eilina far D	onkruptov	0.1/0.0
			Affairs for Individ			04/22
					equally responsible for suppart additional pages, write you	
		. Answer every que	•	uns form. On the top of any	, additional pages, write you	i name and case
Pa	rt 1: Give De	tails About Your Ma	arital Status and Where You	Lived Before		
1.	what is your o	current marital statu	IS?			
	Married					
	☐ Not marrie	ed				
2.	During the las	at 3 years, have you	lived anywhere other than v	where you live now?		
	_		·	•		
	■ No	all af de a ala a a a const	South the lead Occasion Decision	d Santa da codo ana como Porto a como		
	L Yes. List a	all of the places you i	ived in the last 3 years. Do no	ot include where you live now	<b>.</b>	
	Debtor 1:		Dates Debtor 1	Debtor 2 Prior Ad	dress:	Dates Debtor 2
			lived there			lived there
3.					ity property state or territory co, Texas, Washington and W	
Siai	es and termones	s ilicidae Alizolia, Ca	illorriia, Idario, Louisiaria, Nev	vada, New Mexico, i deito iti	co, rexas, washington and w	1300113111.)
	□ No					
	Yes. Make	e sure you fill out Sch	hedule H: Your Codebtors (Of	ficial Form 106H).		
Pa	rt 2 Explain	the Sources of You	r Income			
4.	Did you have	any income from en	nployment or from operatin u received from all jobs and a	g a business during this ye	ear or the two previous calen	idar years?
		•	have income that you receive			
	□ No					
		n the details.				
	Tes. Fill if	i the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and	Sources of income Check all that apply.	Gross income (before deductions
			Ondok all that apply.	exclusions)	oneon all that apply.	and exclusions)
Fre	om January 1 of	f current year until	☐ Wages, commissions,	\$0.00	■ Wages, commissions,	\$6,600.00
		for bankruptcy:	bonuses, tips	<b>42.00</b>	bonuses, tips	+ -,•••••
			☐ Operating a business		☐ Operating a business	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

					Debtor 1		Debtor 2		
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inc		Gross income (before deductions and exclusions)			
			dar year: December :	31, 2021 )	■ Wages, commissions, bonuses, tips			missions,	\$47,465.00
					☐ Operating a business		Operating a	business	
For the calendar year before that: (January 1 to December 31, 2020)					■ Wages, commissions, bonuses, tips	\$37,347.77	■ Wages, com bonuses, tips	missions,	\$19,711.90
					☐ Operating a business		Operating a	business	
Include income regardless of whether that income is taxable. Examples of <i>other income</i> are alimony; child support; Social Security, unemploymer and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lotter winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.  List each source and the gross income from each source separately. Do not include income that you listed in line 4.  No  Yes. Fill in the details.									
					Debtor 1		Debtor 2		
					Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of inc Describe below.		Gross income (before deductions and exclusions)
			1 of currer iled for ban	nt year until kruptcy:	Contribution by son for coaching/training/adv ice (stipend)	\$10,500.00			
<b>Ра</b> 6.	rt 3: Are		Debtor 1's	or Debtor 2'	Made Before You Filed for s debts primarily consume ebtor 2 has primarily consu	r debts? umer debts. Consumer deb	ots are defined in 11	U.S.C. § 10	1(8) as "incurred by an
			During the No.	90 days befo Go to line 7		d you pay any creditor a tot			
	<ul> <li>Yes List below each creditor to whom you paid a total of \$7,575* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.</li> <li>* Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment.</li> </ul>								
		Yes.			r both have primarily consure you filed for bankruptcy, di		tal of \$600 or more?		
			□ No. □ Yes	include pay	ach creditor to whom you pai ments for domestic support o this bankruptcy case.				
Creditor's Name and Address			s Name and	d Address	Dates of payme	ent Total amount paid	Amount you still owe	Was this p	payment for
						•			

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Page 38 of 58

David F. Valencia Debtor 1 Debtor 2 Yolanda C. Valencia Case number (if known) **Creditor's Name and Address** Dates of payment **Total amount** Amount you Was this payment for ... paid still owe **Woodbridge Liquidation Trust** \$35,000.00 \$1,500.00 ■ Mortgage Attn: Michael Goldberg, Liq. ☐ Car **Trustee** ☐ Credit Card c/o Attorney Jeffrey Nolan ☐ Loan Repayment 10100 Santa Monica Blvd, 13th ☐ Suppliers or vendors Floor ■ Other settlement of Los Angeles, CA 90067 preference Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. ☐ No Yes. List all payments to an insider. **Insider's Name and Address** Dates of payment Total amount Amount you Reason for this payment paid still owe \$0.00 \$0.00 Note: paid minimal amounts to No payment totals in the friends last year exceed \$400-500 to any one friend on such a loan. Likely not technically insiders. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. ☐ Yes. List all payments to an insider **Insider's Name and Address Dates of payment Total amount** Amount you Reason for this payment paid still owe Include creditor's name Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number Woodbridge Group of Companies, **Bankruptcy** US Bankr, for District of □ Pending

Ashmore (receiver) v. David Valencia 20-CV-1871

LLC, et al v. David Valencia, et al

AP No. 19-51000

Clawback of U. S. District Court Dist. of Commissions SC

**Deleware** 

■ Pending□ On appeal

□ On appeal

Concluded

settlement reached

☐ Concluded

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Adversary

**Proceeding** 

payments

seeking recovery of certain

	otor 1 David F. Valencia otor 2 Yolanda C. Valencia	Case num	nber (if known)	
		tcy, was any of your property repossessed, forecid	· · · · · ·	d, seized, or levied?
	□ No. Go to line 11.			
	Yes. Fill in the information below.			
	Creditor Name and Address	Describe the Property	Date	Value of the property
		Explain what happened		
	Internal Revenue Service Centralized Insolvency Operation P.O. Box 7346	various levies, maybe \$2000 over the last year on past due income taxes	various	\$0.00
	Philadelphia, PA 19101-7346	☐ Property was repossessed.		
		Property was foreclosed.		
		☐ Property was garnished.		
		■ Property was attached, seized or levied.		
11.	accounts or refuse to make a payment bed ■ No □ Yes. Fill in the details.	•	i institution, set on any a	amounts from your
	Creditor Name and Address	Describe the action the creditor took	Date action was taken	Amount
12.	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a  ■ No □ Yes	tcy, was any of your property in the possession of another official?	an assignee for the bend	efit of creditors, a
Par	t 5: List Certain Gifts and Contributions			
13.	■ No	otcy, did you give any gifts with a total value of mo	ore than \$600 per person	?
	Yes. Fill in the details for each gift.	Describe the office	D-1	Walana
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:			
14.	Within 2 years before you filed for bankrup  □ No	otcy, did you give any gifts or contributions with a	total value of more than	\$600 to any charity?
	Yes. Fill in the details for each gift or cor	ntribution.		
	Gifts or contributions to charities that tot more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	tal Describe what you contributed	Dates you contributed	Value
	Wyldewood Baptist Church Oshkosh, WI 54904	Tithe weekly	weekly	\$75.00

	Debtor 1 David F. Valencia  Debtor 2 Yolanda C. Valencia  Case number (if known)					
Par	t 6: List Certain Losses					
15.	Within 1 year before you filed for bankrup or gambling?	tcy or	since you filed for bankruptcy, did y	ou lose anyt	hing because of thef	t, fire, other disaster,
	■ No □ Yes. Fill in the details.					
	how the loss occurred	nclude	the any insurance coverage for the lo the amount that insurance has paid. L nce claims on line 33 of Schedule A/B:	ist pending	Date of your loss	Value of property lost
Par	t 7: List Certain Payments or Transfers					
16.	Within 1 year before you filed for bankrup consulted about seeking bankruptcy or pi Include any attorneys, bankruptcy petition pro	repari	ng a bankruptcy petition?			rty to anyone you
	□ No					
	Yes. Fill in the details.					
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo	ou	Description and value of any proper transferred	erty	Date payment or transfer was made	Amount of payment
	Steinhilber Swanson LLP 107 Church Avenue Oshkosh, WI 54901	bankruptcy filing services		3-31-2022	\$3,500.00	
	Cricket Debt Counseling				2/22/2022	\$24.00
17.	Within 1 year before you filed for bankrup promised to help you deal with your credi Do not include any payment or transfer that y	tors o	r to make payments to your creditors		or transfer any prope	rty to anyone who
	■ No □ Yes. Fill in the details.					
	Person Who Was Paid Address		Description and value of any proper transferred	erty	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankru transferred in the ordinary course of your Include both outright transfers and transfers include gifts and transfers that you have already No	<b>busin</b> made	less or financial affairs? as security (such as the granting of a se			
	Yes. Fill in the details.  Person Who Received Transfer Address		Description and value of property transferred	payments	any property or received or debts	Date transfer was made
	Person's relationship to you			paid in ex	change	
19.	Within 10 years before you filed for bankribeneficiary? (These are often called asset-p			elf-settled tru	ust or similar device	of which you are a
	☐ Yes. Fill in the details.  Name of trust		Description and value of the prope	erty transferr	ed	Date Transfer was
						made

Statement of Financial Affairs for Individuals Filing for Bankruptcy

	otor 1 David F. Valencia Otor 2 Yolanda C. Valencia			Case num	ber (if known)	
Par	tt 8: List of Certain Financial Accounts, Ins	struments, Safe Depos	sit Boxes, and S	torage Units	S	
20.	Within 1 year before you filed for bankrupto sold, moved, or transferred? Include checking, savings, money market, o houses, pension funds, cooperatives, association of the same series	or other financial acco	unts; certificates	s of deposit		,
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of accoinstrument	ount or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
	Wells Fargo f/k/a Northwest Bank of Minnesota 6th Street and Marquette Minneapolis, MN 55479	xxxx-	■ Checking □ Savings □ Money Ma □ Brokerage □ Other		Business account closed approx. a month ago - closed by Bank for negative balance	Unknown
21.	Do you now have, or did you have within 1 yeash, or other valuables?  No Yes. Fill in the details.  Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	year before you filed for the second with the second and the second and second with the second and second with the second and second with the	ccess to it?		osit box or other depositions of the contents	Do you still have it?
22.		State and ZIP Code)		l year befor	e you filed for bankrupt	tcy?
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)		Describe the contents		Do you still have it?
Par	t 9: Identify Property You Hold or Control	for Someone Else				
23.	for someone.	meone else owns? Ind	clude any proper	rty you borr	owed from, are storing	for, or hold in trust
	☐ Yes. Fill in the details.  Owner's Name  Address (Number, Street, City, State and ZIP Code)	Where is the pro (Number, Street, City Code)		Describe t	the property	Value
Par	t 10: Give Details About Environmental Info	ormation				
For	the purpose of Part 10, the following definition	ons apply:				
	Environmental law means any federal, state toxic substances, wastes, or material into the		-			

regulations controlling the cleanup of these substances, wastes, or material.

Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.

Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

24.	Has any governmental unit notified you that	you may be liable or potentially liable ι	under or in violation of an environme	ntal law?				
	No							
	Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
25.	Have you notified any governmental unit of a	any release of hazardous material?						
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
26.	Have you been a party in any judicial or adm	inistrative proceeding under any envir	onmental law? Include settlements a	nd orders.				
	■ No □ Yes. Fill in the details.							
	Case Title Case Number Name Address (Number, Street, City, State and ZIP Code)  Nature of the case							
Par	t 11: Give Details About Your Business or C	connections to Any Business						
27.	Within 4 years before you filed for bankrupto	y, did you own a business or have any	y of the following connections to any	business?				
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time							
	■ A member of a limited liability company (LLC) or limited liability partnership (LLP)							
	☐ A partner in a partnership							
	☐ An officer, director, or managing exe	cutive of a corporation						
	☐ An owner of at least 5% of the voting or equity securities of a corporation							
	☐ No. None of the above applies. Go to Pa	art 12.						
	Yes. Check all that apply above and fill i	in the details below for each business.						
	Business Name	Describe the nature of the business	Employer Identification number					
	Address (Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Security n	Do not include Social Security number or ITIN.				
			Dates business existed					
	Valencia Financial Services, LLC 2540 Gaslight Ct	financial services	EIN: 86-1235938					
		none employed - Debtor handled	From-To 2017 - 2021					
	Within 2 years before you filed for bankrupto institutions, creditors, or other parties.	ry, did you give a financial statement to	o anyone about your business? Includ	de all financial				
	□ No							
	Yes. Fill in the details below.							
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued						
	Internal Revenue Service maybe 2020 in connection with a Centralized Insolvency Operation request for installment agreement P.O. Box 7346 Philadelphia, PA 19101-7346							

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1 David F. Valencia
Debtor 2 Yolanda C. Valencia

Case number (if known)

Name
Address
(Number, Street, City, State and ZIP Code)

Woodbridge Liquidation Trust
Attn: Michael Goldberg, Liq.
Trustee
c/o Attorney Jeffrey Nolan
10100 Santa Monica Blvd, 13th
Floor
Los Angeles, CA 90067

Counsel for Plaintiffs

Date Issued

2021

Related to Debtor's involvement

in Case No. 6:20-cv-01871-BHH

in Case No. 6:20-cv-01871-BHH (U.S. District Court of South Carolina, Greenville Division)

Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.

18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ David F. Valencia	/s/ Yo	olanda C. Valencia	
David F. Valencia	Yolan	nda C. Valencia	
Signature of Debtor 1	Signat	ture of Debtor 2	
Date _April 21, 2022	Date	April 21, 2022	
Did you attach additional pages to Your States	ment of Financial A	Affairs for Individuals Filing for Bankruptcy (Official	Form 107)?
■ No			
□Yes			
Did you pay or agree to pay someone who is r	not an attorney to h	help you fill out bankruptcy forms?	
■ No			

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Official Form 107

	rmation to identify your case:		eck one box only as dii 2A-1Supp:	rected in this form and	l in Form
Debtor 1	David F. Valencia		гл тоирр.		
Debtor 2 (Spouse, if filing)	Yolanda C. Valencia		1. There is no presu	imption of abuse	
	Bankruptcy Court for the: Eastern District of	Wisconsin		o determine if a presun ade under <i>Chapter 7 I</i> cial Form 122A-2).	
Case number (if known)			☐ 3. The Means Test of qualified military	does not apply now be service but it could ap	
			☐ Check if this is ar	n amended filing	
Official F	orm 122A - 1			•	
	7 Statement of Your Cur	rent Monthly Inc	ome		12/19
attach a separat case number (if qualifying milita	and accurate as possible. If two married people are sheet to this form. Include the line number to wknown). If you believe that you are exempted frow ry service, complete and file Statement of Exempalculate Your Current Monthly Income	hich the additional information a m a presumption of abuse becau	applies. On the top of an se you do not have prim	y additional pages, writ arily consumer debts o	e your name and r because of
1. What is	our marital and filing status? Check one or	nly.			
	arried. Fill out Column A, lines 2-11.				
☐ Marri	ed and your spouse is filing with you. Fill o	ut both Columns A and B, lines	2-11.		
☐ Marri	ed and your spouse is NOT filing with you.	You and your spouse are:			
	ing in the same household and are not lega				
pe	ing separately or are legally separated. Fill nalty of perjury that you and your spouse are I ng apart for reasons that do not include evadin	egally separated under nonban	kruptcy law that applie	s or that you and your	
101(10A). Fo the 6 months	erage monthly income that you received from all r example, if you are filing on September 15, the 6-m , add the income for all 6 months and divide the total the same rental property, put the income from that p	onth period would be March 1 throuby 6. Fill in the result. Do not include	ugh August 31. If the amou de any income amount mo	unt of your monthly incompre than once. For examp	ne varied during le, if both
			Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
	ss wages, salary, tips, bonuses, overtime, eductions).	and commissions (before all	\$	\$	
	and maintenance payments. Do not include is filled in.	payments from a spouse if	\$	\$	
of you of from an u and room	Ints from any source which are regularly par or your dependents, including child support Inmarried partner, members of your household Inmates. Include regular contributions from a sp Do not include payments you listed on line 3.	Include regular contributions d, your dependents, parents,	\$	\$	
5. Net inco	me from operating a business, profession,				
		Debtor 1			
1	ceipts (before all deductions)	-\$			
1	and necessary operating expenses hly income from a business, profession, or far	· — .	\$	\$	
I	me from rental and other real property				
0. 1101 11100	Sur Sur Sur Sur Sur Property	Debtor 1			
Gross re	ceipts (before all deductions)	\$			
Ordinary	and necessary operating expenses	-\$			
Net mont	hly income from rental or other real property	\$ Copy here ->	\$	\$	
7. Interest,	dividends, and royalties		\$	\$	

Official Form 122A-1

**Chapter 7 Statement of Your Current Monthly Income** 

Debtor 1 Debtor 2 David F. Valencia Yolanda C. Valencia

Case number (if known)

					Column A Debtor 1	Column B Debtor 2 or non-filing s	
8.	Unem	ployment compensation			\$	\$	
	the So	enter the amount if you contend that the amount received was a cial Security Act. Instead, list it here: you \$					
	For	you \$ your spouse \$					
	Pension benefit not incommended United disability pay particles in does n	on or retirement income. Do not include any amount received to under the Social Security Act. Also, except as stated in the next lude any compensation, pension, pay, annuity, or allowance paire. States Government in connection with a disability, combat-relatively, or death of a member of the uniformed services. If you receive id under chapter 61 of title 10, then include that pay only to the cost exceed the amount of retired pay to which you would otherwised under any provision of title 10 other than chapter 61 of that title	that wat sent d by the dinjuded and displayed and displayed and displayed and and and and and and and and and an	ras a rence, do he ury or ny retired t that it	\$	\$	
10.	Incom Do not receive domes United disabili	e from all other sources not listed above. Specify the source include any benefits received under the Social Security Act; payed as a victim of a war crime, a crime against humanity, or internatic terrorism; or compensation pension, pay, annuity, or allowan States Government in connection with a disability, combat-relatity, or death of a member of the uniformed services. If necessary is on a separate page and put the total below	and ymen ation ace pa	ts al or aid by the ury or			
					\$	\$	
					\$	\$	
		Total amounts from separate pages, if any.		+	\$	\$	
11.		ate your total current monthly income. Add lines 2 through 10 olumn. Then add the total for Column A to the total for Column E		\$	<b>+</b> \$		Total current monthly
Dont	2.	Determine Whether the Manne Test Applies to Ver					income
Part	2:	Determine Whether the Means Test Applies to You					
12.	Calcul	ate your current monthly income for the year. Follow these s	teps:				
	12a. C	opy your total current monthly income from line 11			Copy line 11 h	nere=>	\$
	M	lultiply by 12 (the number of months in a year)					<b>x</b> 12
	12b. T	he result is your annual income for this part of the form				12b.	\$
13.	Calcul	ate the median family income that applies to you. Follow the	se ste	eps:			
		he state in which you live.					
	Eill in 4	he number of people in your bousehold					
		he number of people in your household.					
	To find	he median family income for your state and size of household I a list of applicable median income amounts, go online using the form. This list may also be available at the bankruptcy clerk's of	e link		in the separate instruc	13. tions	\$
14.	How d	o the lines compare?					
	14a.	☐ Line 12b is less than or equal to line 13. On the top of pag Go to Part 3. Do NOT fill out or file Official Form 122A-2.			,	•	
	14b.	☐ Line 12b is more than line 13. On the top of page 1, check Go to Part 3 and fill out Form 122A–2.	c box	2, The pre	esumption of abuse is	determined by	Form 122A-2.
Part	3:	Sign Below					
	В	y signing here, I declare under penalty of perjury that the informa-	ation	on this sta	tement and in any atta	achments is tru	e and correct.
	X	/s/ David F. Valencia	X	/s/ Yola	nda C. Valencia		
		David F. Valencia		Yolanda	a C. Valencia		
	<b>.</b>	Signature of Debtor 1	D	J	e of Debtor 2		
	Date	April 21, 2022	∪ate	April 21	, 2022		

Official Form 122A-1

**Chapter 7 Statement of Your Current Monthly Income** 

Debtor 1 Debtor 2	David F. Valencia Yolanda C. Valencia	Case number (if known)	
	MM/DD/YYYY	MM / DD / YYYY	
	If you checked line 14a, do NOT fill out or file Form 122A-2.		
	If you checked line 14b, fill out Form 122A-2 and file it with this form.		

Fill	in this info	orma	ation to identify you	r case:		
Deb	otor 1	Da	vid F. Valencia			
	otor 2 ouse, if filir		olanda C. Valencia		_	
Unit	ed States	Bank	ruptcy Court for the:	Eastern District of Wisconsin		
			. ,		_	☐ Check if this is an amended filling
	e number nown)					— Check if this is an americal iming
Off	ficial F	orr	m 122A - 1S	upp		
Sta	ateme	nt	of Exemption	on from Presumptior	n of Ab	use Under § 707(b)(2) 12/15
exen excl	npted from usions in ired by 11	n a p this s U.S.	resumption of abuse	e. Be as complete and accurate as posterior only one of you, the other person s	ossible. If t	<i>me</i> (Official Form 122A-1), if you believe that you are two married people are filing together, and any of the plete a separate Form 122A-1 If you believe that this is
1.	personal,	fami		ose." Make sure that your answer is co		C. § 101(8) as "incurred by an individual primarily for a h the answer you gave at line 16 of the <i>Voluntary Petition for</i>
			Form 122A-1; on the ement with the signed		1, There is	no presumption of abuse, and sign Part 3. Then submit this
	☐ Yes. (	Go to	Part 2.			
Dow	101 D	. 4	sina Militau	, Camina Draviniana Annhyta Vay		
Par			•	Service Provisions Apply to You		
۷.	□ No.		,	fined in 38 U.S.C. § 3741(1))?		
				while you were an optive duty or while		orforming a homeland defence activity?
		-	5.C. § 101(d)(1); 32 l		e you were p	erforming a homeland defense activity?
			Go to line 3.	5.5.C. § 901(1).		
			Go to Form 122A-1:	on the top of page 1 of that form, checent with the signed Form 122A-1.	ck box 1, Th	ere is no presumption of abuse, and sign Part 3. Then
			Submit this supplem	one with the digned Form 1227( ).		
3.	Are you		•	rvist or member of the National Gua	ırd?	
	☐ No.	Con	nplete Form 122A-1. I	Do not submit this supplement.		
	☐ Yes.	Wer	e you called to active	duty or did you perform a homeland d	lefense activ	ity? 10 U.S.C. § 101(d)(1); 32 U.S.C. § 901(1).
		Ю.	Complete Form 122	A-1. Do not submit this supplement.		
	ΠY	es.	Check any one of th	e following categories that applies:		
			I was called to acti 90 days and remain	ve duty after September 11, 2001, fo on active duty.	r at least	If you checked one of the categories to the left, go to Form 122A-1. On the top of page 1 of Form 122A-1, check box 3, <i>The Means Test does not apply now</i> , and sign Part 3. Then
			90 days and was rel	ve duty after September 11, 2001, fo eased from active duty on	,	submit this supplement with the signed Form 122A-1. You are not required to fill out the rest of Official Form 122A-1 during the exclusion period. The exclusion period means the time you are on active duty or are performing a
				nomeland defense activity for at leas		homeland defense activity, and for 540 days afterward. 11
		_		·	-	U.S.C. § 707(b)(2)(D)(ii).
			i periormea a nome	eland defense activity for at least 90	uays,	Market and the Control of the Arthur

Official Form 122A-1Supp

Statement of Exemption from Presumption of Abuse Under § 707(b)(2)

, which is fewer than 540 days before I

If your exclusion period ends before your case is closed, you may have to file an amended form later.

ending on \_\_\_\_\_\_\_\_file this bankruptcy case.

Ell in this inform			
Debtor 1	nation to identify your case:  David F. Valencia		
Debior	First Name Middle Name	Last Name	
Debtor 2	Yolanda C. Valencia		
(Spouse if, filing)	First Name Middle Name	Last Name	
United States Ba	nkruptcy Court for the: EASTERN DISTI	RICT OF WISCONSIN	
Case number _			
(if known)			Check if this is an amended filing
			amended illing
0((:::15	400		
Official Fo			_
Statemer	nt of Intention for Indiv	viduals Filing Under Chapte	r 7 12/15
If you are an indi	ividual filing under chanter 7 ver must fi	III aut this farm it.	
	ividual filing under chapter 7, you must fi e claims secured by your property, or	in out this form it.	
_	ed personal property and the lease has i	not expired.	
You must file this	s form with the court within 30 days after	r you file your bankruptcy petition or by the date set	
wnicne on the		ne time for cause. You must also send copies to the	creditors and lessors you list
If two married ne	eonle are filing together in a joint case, h	oth are equally responsible for supplying correct inf	ormation Roth debtors must
	nd date the form.	our are equally responsible for supplying correct in	ormation. Both debtors must
	and accurate as possible. If more space i our name and case number (if known).	is needed, attach a separate sheet to this form. On the	ne top of any additional pages,
Part 1: List Yo	our Creditors Who Have Secured Claims		
1. For any credite information be		D: Creditors Who Have Claims Secured by Property	(Official Form 106D), fill in the
	editor and the property that is collateral	What do you intend to do with the property that	Did you claim the property
		secures a debt?	as exempt on Schedule C?
Creditor's <b>F</b> name:	reedom Mortgage	☐ Surrender the property.	□ No
name.		<ul><li>Retain the property and redeem it.</li><li>Retain the property and enter into a</li></ul>	■ Yes
Description of	2540 Gaslight Court Oshkosh,	Reaffirmation Agreement.	
property	WI 54904 Winnebago County Value listed is EFMV per 2021	☐ Retain the property and [explain]:	
securing debt:	tax bill which debtors believe to		
	be accurate		-
Part 2: List Yo	our Unexpired Personal Property Leases		
		I in Schedule G: Executory Contracts and Unexpired nexpired leases are leases that are still in effect; the	
		the trustee does not assume it. 11 U.S.C. § 365(p)(2	
Describe vour u	nexpired personal property leases		Will the lease be assumed?
•			_
Lessor's name: Description of lea	ased		□ No
Property:			☐ Yes
Logocalo a care			П.,
Lessor's name: Description of lea	ased		□ No
Property:			☐ Yes
Official Form 108	Statement of I	ntention for Individuals Filing Under Chapter 7	page 1

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Debte Debte	tor 1 David F. Valencia tor 2 Yolanda C. Valencia	Case number (if known)
Lessor's name: Description of leased Property:		□ No
		☐ Yes
Lessor's name: Description of leased Property:		□ No
		☐ Yes
Lessor's name: Description of leased		□ No
	perty:	☐ Yes
	sor's name: cription of leased	□ No
	perty:	☐ Yes
Lessor's name:		□ No
Description of leased Property:		☐ Yes
Part 3	3: Sign Below	
	er penalty of perjury, I declare that I have indicated my intention erty that is subject to an unexpired lease.	about any property of my estate that secures a debt and any personal
X	/s/ David F. Valencia	X /s/ Yolanda C. Valencia
David F. Valencia		Yolanda C. Valencia
	Signature of Debtor 1	Signature of Debtor 2
	Date <b>April 21, 2022</b>	Date April 21, 2022

Statement of Intention for Individuals Filing Under Chapter 7

page 2

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#### Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

#### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	
\$78	administrative fee	
+ \$15	trustee surcharge	
\$338	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

Best Case Bankruptcy

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

\$571 administrative fee

\$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Page 53 of 58

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://www.uscourts.gov/services-forms/bankruptcy/cre">http://www.uscourts.gov/services-forms/bankruptcy/cre</a> dit-counseling-and-debtor-education-courses.

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/services-forms/bankruptcy/cre">http://www.uscourts.gov/services-forms/bankruptcy/cre</a> dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Best Case Bankruptcy

## **United States Bankruptcy Court Eastern District of Wisconsin**

	David F. Valencia	ern Bistrict of Wisconsin	•		
In			Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPEN	NSATION OF ATTOR	NEY FOR DE	BTOR(S)	
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(compensation paid to me within one year before the filin be rendered on behalf of the debtor(s) in contemplation of	g of the petition in bankruptcy,	or agreed to be paid	to me, for services rendered or to	
	For legal services, I have agreed to accept		\$	3,500.00	
	Prior to the filing of this statement I have received		\$	0.00	
	Balance Due			3,500.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed comp	ensation with any other person t	inless they are memb	pers and associates of my law firm.	
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the name				
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:				
	<ul> <li>a. Analysis of the debtor's financial situation, and rende</li> <li>b. Preparation and filing of any petition, schedules, state</li> <li>c. Representation of the debtor at the meeting of credite</li> <li>d. [Other provisions as needed]</li> <li>Advice on duties and obligations as Debte</li> </ul>	ement of affairs and plan which ors and confirmation hearing, and	may be required; d any adjourned hear	rings thereof;	
6.	By agreement with the debtor(s), the above-disclosed fee Services requiring special expertise not		service:		
		CERTIFICATION			
this	I certify that the foregoing is a complete statement of any bankruptcy proceeding.	y agreement or arrangement for	payment to me for re	epresentation of the debtor(s) in	
	April 21, 2022	/s/ Paul G. Swans	on		
	Date	Paul G. Swanson Signature of Attorney STEINHILBER SW 107 Church Avenu Oshkosh, WI 5490	/ VANSON LLP Je J1		
		920-235-6690 Fax pswanson@steinl		m	
		Name of law firm			

# **United States Bankruptcy Court** Eastern District of Wisconsin

In re	David F. Valencia Yolanda C. Valencia		Case No.	
_		Debtor(s)	Chapter	7
The abov		TICATION OF CREDITOR  t the attached list of creditors is true and c		of their knowledge.
Date: _	April 21, 2022	/s/ David F. Valencia David F. Valencia Signature of Debtor		
Date: _	April 21, 2022	/s/ Yolanda C. Valencia		

Signature of Debtor

American Express c/o Nationwide Credit PO Box 15130 Wilmington, DE 19850

Aurora Health Care PO Box 0909996 Milwaukee, WI 53209-0996

Beattie Ashmore, receiver c/o Atty Lewis Walter Tollison 18B Marckley St. Greenville, SC 29601

Capital One c/o Financial Recovery Services PO Box 385908 Minneapolis, MN 55438-5908

Citibank c/o Halsted Financial Services PO Box 828 Skokie, IL 60076

Credit One c/o Midland Credit 350 Camino De La Reina, Suite 100 San Diego, CA 92108

Debtors both reside in Wisconsin

Freedom Mortgage PO Box 6656 Chicago, IL 60680-6656

Greg Scianna 470 Saddle Ridge Road Hamilton, MT 59840

Internal Revenue Service Centralized Insolvency Operation P.O. Box 7346 Philadelphia, PA 19101-7346

John Schieck 2010 S Oakwood Road Oshkosh, WI 54904

Luis Fierro 2540 Gaslight Court Oshkosh, WI 54904 Michael Barbaria 4706 Jonagold Place Caldwell, ID 83607

Paul Valencia 1021 Diadem Drive San Jose, CA 95116

Sears c/o Messerli Kramer 3033 Campus Drive, Suite 250 Minneapolis, MN 55441

Synchrony Bank c/o Client Services 3451 Harry S Truman Blvd Saint Charles, MO 63301

Thomas D. Sherman, Esq. Locke Lord LLP Terminus 200 Suite 1200 333 Piedmont Road, NE Atlanta, GA 30305

Verizon c/o CBE Group, Inc. PO Box 2632 Waterloo, IA 50704-2635

Wells Fargo c/o Halsted Financial Services PO Box 828 Skokie, IL 60076

Wells Fargo PO Box 10647 Des Moines, IA 50306

Wells Fargo c/o Radius Collections 7831 Glenroy Road, Suite 250-A Minneapolis, MN 55439

Wisconsin Department of Revenue P.O. Box 8981 Madison, WI 53708-8981

Woodbridge Liquidation Trust Attn: Michael Goldberg, Liq. Trustee c/o Attorney Jeffrey Nolan 10100 Santa Monica Blvd, 13th Floor Los Angeles, CA 90067